2004   ANNUAL   REPORT
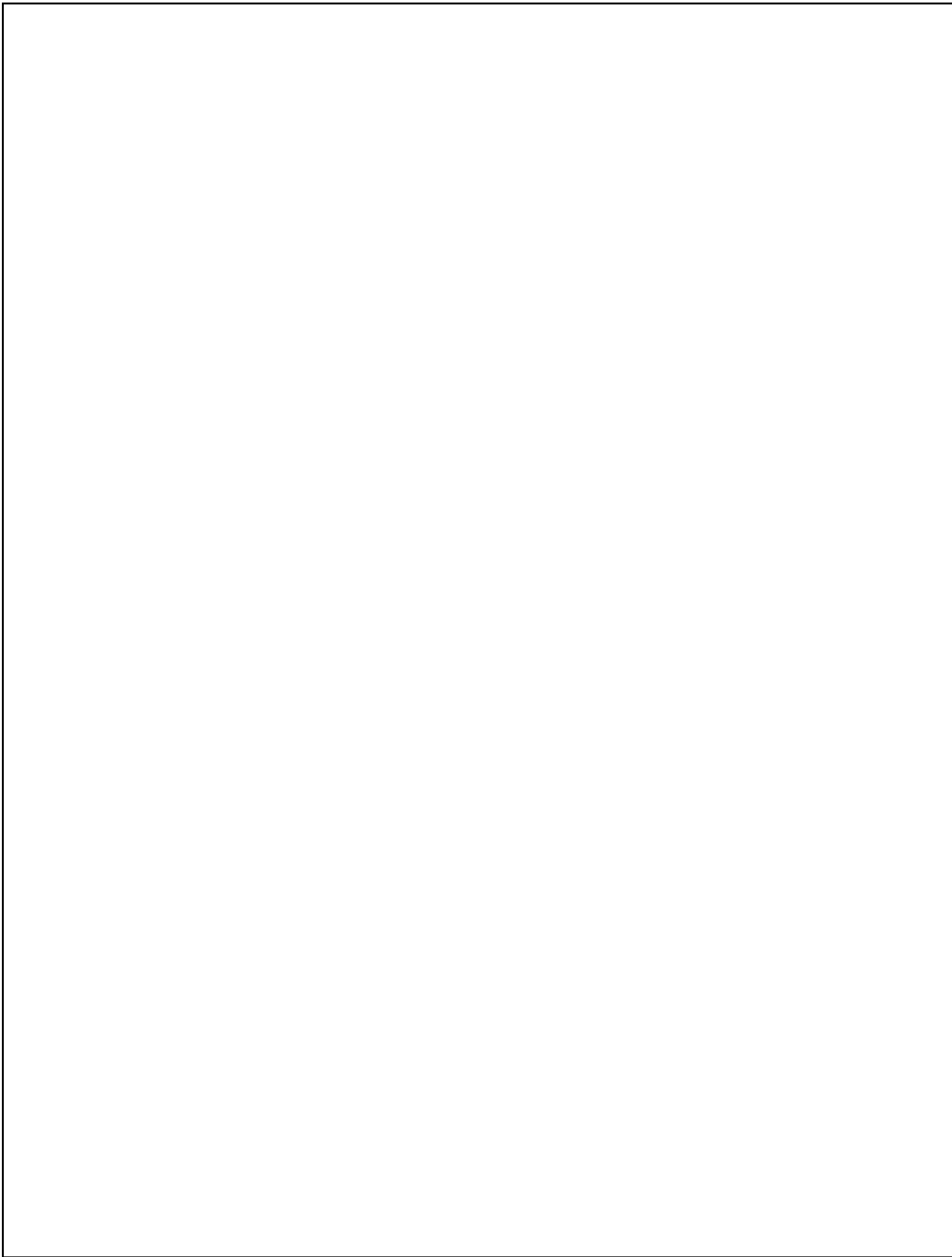
Utah State Division
of Aging and Adult Services

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INTRODUCTION

Older Americans Act

The Older Americans Act (OAA) was passed by Congress in 1965, creating the first federal legislation devoted exclusively to addressing the needs and challenges of older Americans. Since its passage, the Older Americans Act, as amended through 2000, has provided funding and leadership resulting in the establishment of a unique nationwide network of federal, state and local governments, and private providers serving the diverse needs of America's seniors. The Act can be viewed as a work in progress that has been amended on several occasions to address the changing needs of older Americans.

The first Older Americans Act established the Administration on Aging (AOA) in the federal Department of Health and Human Services, provided grants for demonstration projects and research on aging, training grants, financial support for state offices or units on aging, and funds for states to use in supporting projects for the aging population.

Amendments passed in 1969 established the National Older Americans Volunteer Program which provided for Retired Senior Volunteers and Foster Grandparents. In 1972, the Act was amended as a result of a series of nutritional research and demonstration projects, creating a permanent nationwide nutrition program for the elderly. Amendments to the Act in 1973 required the states to create planning and service areas and to designate a public or private non-profit agency to serve as the Area Agency on Aging (AAA) in each of these locations. Currently there are 655 such agencies in the United States which plan and coordinate services and opportunities for older persons on a regional basis, 12 of which are found in Utah.

Other amendments passed in the 1970s established the Senior Community Service Employment Program, awarded grants for low-income persons age 60 and over to work as senior companions, supplied surplus commodities to the nutrition program with assistance from the U. S. Department of Agriculture, and added a separate age discrimination act. Amendments passed near the end of the decade established the Long-Term Care Ombudsman program providing professional and volunteer ombudsmen who assist older persons living in long-term care facilities. During the 1980s, enacted amendments required the Area Agencies on Aging to address the needs of older persons with limited ability to speak English, established a federal office for Native American, Alaskan Native, and Native Hawaiian Programs and increased an emphasis on services to the low-income minority elderly.

The most recent reauthorization of the OAA occurred in 2000 and further enhanced and enriched the Act. The Act included the National Family Caregiver Support Program designed to assist caregivers of frail elder adults, and to a limited extent, grandparents raising grandchildren under the age of 18. The bill clarified the ability of Area Agencies on Aging to provide case management and information and referral services. The states must now assure that special needs of older individuals residing in rural areas will be taken into consideration and must describe how funds will be allocated to meet those needs. Also, the bill requires the Administration on Aging to develop, in collaboration with the aging network, a set of performance outcome measures for planning, managing and evaluating activities. The Division of Aging and Adult Services has been participating in the piloting of some of the proposed performance outcome measures.

Utah's Aging and Adult Services Program

The Division of Aging and Adult Services was created as Utah's State Unit on Aging in accordance with the Older Americans Act. By Utah statute (62A-3-104) the Division was granted the legal authority to establish and monitor programs that serve the needs of Utah's seniors. Local Area Agencies on Aging have been designated to cover all geographic regions of the state and are charged with the responsibility of providing a comprehensive array of services and advocacy for the needs of seniors residing in their areas.

In 1986, the Division was given the administrative authority for Adult Protective Services, a program to protect vulnerable adults from abuse, neglect, and exploitation. Adult Protective Services workers provide services designed to assist victims and prevent further abuse, neglect, and exploitation. Staff are located in a statewide system of offices and work in cooperation with local law enforcement to investigate cases involving seniors and disabled adults.

The Division has adopted the following Vision Statement, Mission Statement and Guiding Principles to communicate its purpose.

VISION STATEMENT

"OFFERING CHOICES FOR INDEPENDENCE"

MISSION STATEMENT

The mission of the Division of Aging and Adult Services is to:

- Provide leadership and advocacy in addressing issues that impact older Utahns, and serve elder and disabled adults needing protection from abuse, neglect or exploitation.

- Fulfill our vision of **offering choices for independence** by facilitating the availability of a community-based system of services in both urban and rural areas of the state that support independent living and protect quality of life.

- Encourage citizen involvement in the planning and delivery of services.

GUIDING PRINCIPLES

The Division of Aging and Adult Services believes that:

- Utah's aging and adult population has many resources and capabilities which need to be recognized and utilized. The Division has an advocacy responsibility for ensuring opportunities for individuals to realize their full potential in the range of employment, volunteer, civic, educational, and recreational activities.

- Individuals are responsible for providing for themselves. When problems arise, the family is the first line of support. When circumstances necessitate assistance beyond the family, other avenues may include friends, neighbors, volunteers, churches, and private and public agencies. The Division and its contractors are responsible to assist individuals when these supportive mechanisms are unable to adequately assist or protect the individual.

- Expenditure of public funds for preventive services heightens the quality of life and serves to delay or prevent the need for institutional care.

- Aging and Adult Services programs should promote the maximum feasible independence for individual decision making in performing everyday activities.

- An individual who requires assistance should be able to obtain services in the least restrictive environment, most cost-effective manner, and most respectful way.

ORGANIZATIONAL STRUCTURE

The Division has the responsibility to administer, deliver and monitor services to aging and vulnerable adult residents of Utah. To meet this responsibility, two program areas have been created: 1) Aging Services, and 2) Adult Protective Services.

The Aging Services Program is responsible for the provision of services needed by the elderly as set forth in the Older Americans Act and other enabling legislation funded by federal, state, and local governments. Aging services in Utah are delivered by local Area Agencies on Aging through contracts from the State Division of Aging and Adult Services.

The Adult Protective Services Program is mandated by state law to investigate all cases of reported abuse, neglect or exploitation of vulnerable adults. The program also offers services designed to protect abused, neglected, or exploited vulnerable adults from further victimization and assist them in overcoming the physical or emotional effects of such abuse. The following chart depicts the organizational structure of the Division of Aging and Adult Services.

Utah State Division Of Aging And Adult Services

Organizational Chart

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                          │         Governor         │
                          └─────────────┬───────────┘
                          ┌─────────────┴───────────┐
                          │  Utah State Department of │
                          │     Human Services        │
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┌──────────────────┐      ┌─────────────┴───────────┐      ┌──────────────────┐
│ Long-Term Care   │──────│                          │──────│  State Board of  │
│ Ombudsman        │      │  Utah State Division of   │      │  Aging and Adult │
├──────────────────┤      │  Aging and Adult Services │      │  Services        │
│ Legal Services   │──────│                          │      └──────────────────┘
│ Developer        │      └─────────────┬───────────┘
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Governor

Utah State Department of
Human Services

Long-Term Care
Ombudsman

Legal Services
Developer

Utah State Division of
Aging and Adult Services

State Board of
Aging and Adult
Services

Adult Protective
Services

Aging Services

Management
Services
Fiscal/Reporting

Regional Offices

Older Americans
Act Programs

In-Home Services
Programs

Area Agencies on Aging
(AAAs)

Local Government Units

Area Advisory
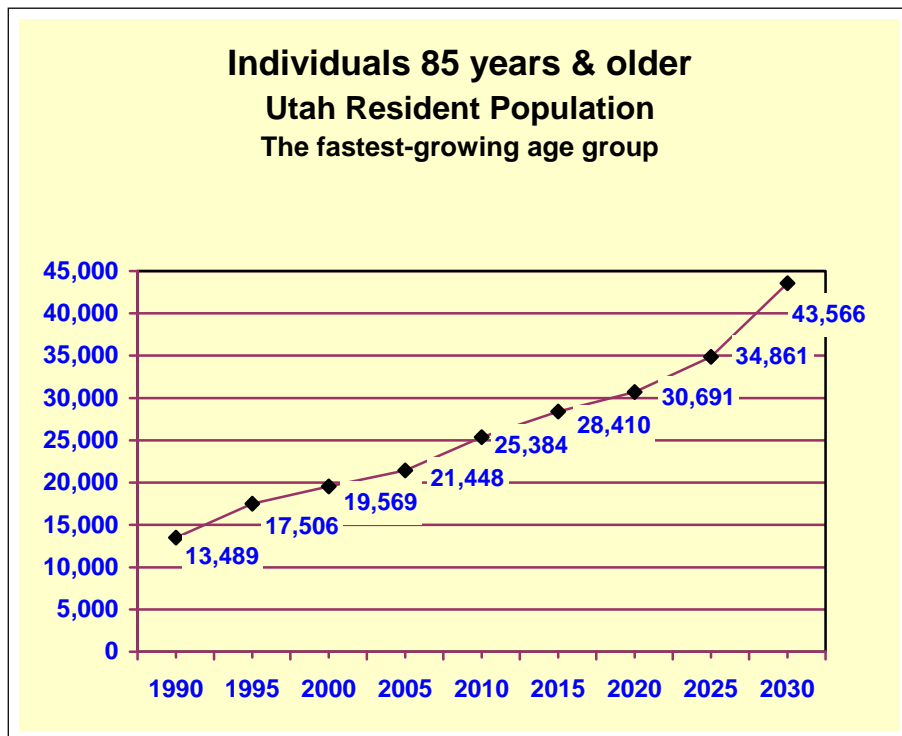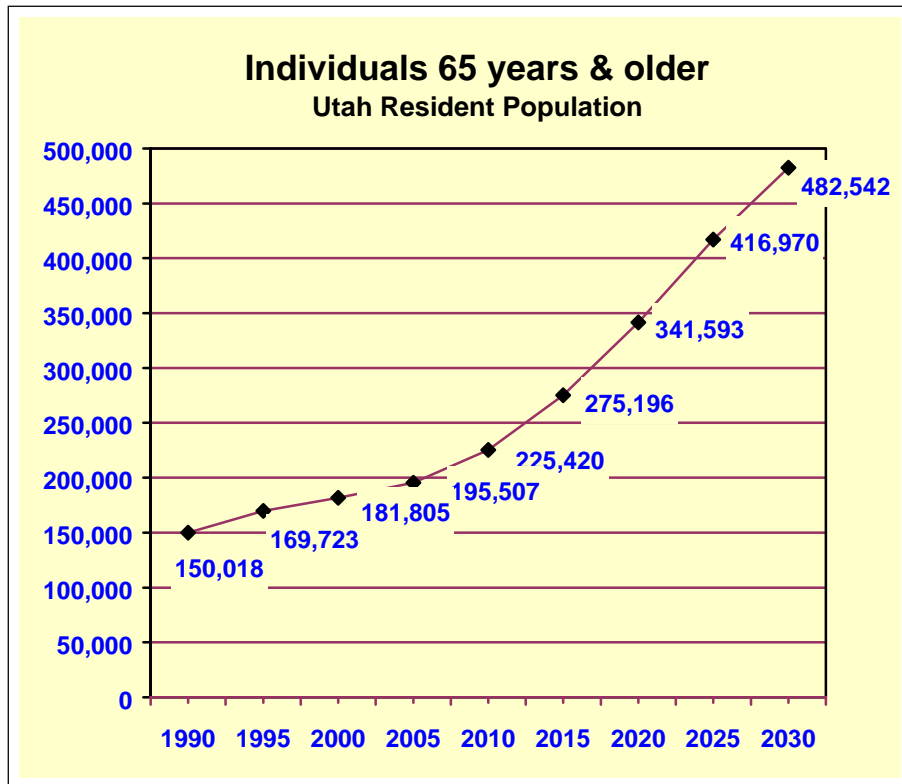Councils

Local Service Providers

Population Growth of Seniors in Utah

Providing needed services to the senior population of Utah will become more challenging in the future due to increasing growth of this population. The U. S. Census Bureau predicts that the senior population in the U. S. will increase to 70.2 million by the year 2030, and that Utah's senior population (65 and older) will grow to 482,542 by the year 2030.

Utah continues as the nation's "youngest state." Its median age of 27 years is eight years younger than the U. S. median of 35. Despite its youthfulness, Utah's population is growing older and living longer. The following charts show that Utah's 65+ population will increase by **165 percent** between 2000 and 2030. In addition, the 85+ population in Utah will increase by **123 percent** between 2000 and 2030. The actual population number of those 85+ is 19,569 in 2000 and is estimated to be 43,566 in 2030.

The "baby boomer" cohort, those born between 1946 and 1964, will dramatically increase the 60+ population group beginning in 2006. The projected annual increase of the 60+ group starting in 2006 will be three times the increase observed between 1993 and 2006.

According to the 2000 census, Utah has the sixth most rapidly increasing population age 65 and older in the nation. The predicted aging of the state is a situation that has been created by two main factors: 1) the increase in longevity due to better health, sanitation, nutrition, and medicine and, 2) the "baby boomer" cohort reaching retirement age. There is concern that the predicted growth of those needing services will overwhelm the existing programs and services that are currently being provided to Utah's older citizens. There is a need to invest in planning and designing better ways to articulate the impact that the aging of Utah's population will have upon the current service delivery systems, while at the same time maintaining a solid foundation of current services for existing individuals over the age of 65.

Individuals 65 years & older
Utah Resident Population

Year	Population
1990	150,018
1995	169,723
2000	181,805
2005	195,507
2010	225,420
2015	275,196
2020	341,593
2025	416,970
2030	482,542

Individuals 85 years & older
Utah Resident Population
The fastest-growing age group

Year	Population
1990	13,489
1995	17,506
2000	19,569
2005	21,448
2010	25,384
2015	28,410
2020	30,691
2025	34,861
2030	43,566

Source: Demographic & Economic Analysis, Governor's Office of Planning & Budget, 2000

2004 Annual Report

New Activities of the Division of Aging and Adult Services

Aging Initiative

The rapid aging of Utah's population will present opportunities and challenges to every public agency and community. In an effort to raise the awareness of state governmental agencies on the challenges presented by Utah's increasing older population, the Division actively participated in a collaborative effort known as the Utah Aging Initiative with the University of Utah Center for Public Policy and Administration and other state agencies. The primary purpose of the Initiative is to raise awareness about and to develop strategies to address the challenges presented by the ncreasing older population. One of the first products of the Initiative was a briefing book that presented basic demographic facts and figures about the aging of Utah's "baby boomer" population and will be used to assist state and local governments to analyze, plan and prepare for the impacts of the aging population on services and operations. The second phase of the Initiative will be to conduct a series of focus groups during which a representative sample of the community will be asked to identify aging issues that are of greatest concern and offer advice as to what the state needs to be doing to respond. Seven focus groups will be conducted in both urban and rural areas of Utah. A copy of the briefing book can be viewed on the Division's web site at www.hsdaas.utah.gov.

Senior Technology Showcase

The second annual Senior Technology Showcase was a joint public and private venture designed to introduce computer technology to one of the fastest growing segments of Utah' population, those 65 years and older. Co-sponsored by AARP of Utah, Walgreen Drugs Stores, Totally Awesome Computers, Zions Bank, the Centers for Medicare and Medicaid Services, and over 40 other commercial, private and public organizations, including many state and local government agencies, the Showcase provided an opportunity to engage in a learning experience specifically tailored to seniors.

Seniors were offered a unique opportunity to learn how computer technology can enable them to safely transact business, engage in e-mail with family and friends and keep in touch with the expanding world of the Internet.

Currently it is difficult to be an active part of society if a person is not computer literate and able to access the Internet. Almost every television and radio news program encourages listeners to "log onto" their web site to obtain additional information about a news story. Banks and other financial institutions encourage clients to use their computer-based automated systems, and often offer an array of additional services as an inducement. Some airlines are now charging a surcharge to customers who do not use their automated computer systems to purchase a ticket. E-mail addresses are getting to be as common as regular post office mailing addresses.

During the two-day event, seniors were able to attend workshops on how to use computers from the basics to the more advanced features, how to successfully and safely use the Internet to transact business and obtain information and how to use e-mail to keep in touch with family, friends and their community. In addition, seniors attended programs on how to use computer technology to do genealogy research, modify and repair damaged photos and electronically store the repaired photos. All workshops and programs were presented by professionals specifically selected because of their experience in senior friendly teaching techniques. Two hundred computers were available for seniors to use to practice what they had learned and to e-mail their friends. Volunteers from AARP were on hand to lend assistance. In addition to the small workshops, the

Showcase included a series of well attended presentations on a wide range of computer technology subjects. It is estimated that over 1,000 seniors attended the two day event.

Centenarian Celebration

The Utah Governor's Century Club Celebration honors Utah's oldest citizens, those who have reached the age of 100 years. This Celebration was hosted by Governor Walker and Mr. Walker. The Governor presented each centenarian with a specially designed pin and a certificate of membership into Utah's Century Club. Centenarians and their family members had brunch and visited with the Governor. The Utah State Division of Aging and Adult services has orchestrated this event for 18 years, and it has become a Utah tradition for Utah's centenarians. Currently, four television stations send cameramen and reporters, and the major newspapers in Salt Lake County, Utah County, and Ogden have their reporters on site to write special stories after talking with the centenarians. It is an event with the dignity and recognition that Utah's centenarians deserve. Many centenarians have said that they thoroughly enjoy the celebration and look forward to it every year. They have reported that they wear their 100-year pins everywhere with pride.

State Board of Aging and Adult Services

The Board of Aging and Adult Services is the program policymaking body for the Division of Aging and Adult Services. The seven member Board is appointed by the governor and confirmed by the State Senate. Members are from both rural and urban areas of the state and the Board is nonpartisan in its composition. The Board meets on a monthly basis and regularly hears from Division staff and the Chair of the Utah Association of Area Agencies on Aging, a group that represents Utah's 12 area agencies on aging. While most of the meetings are held in Salt Lake City, the Board conducts several of its monthly meetings in rural Utah. During all meetings members of the public are invited and encouraged to participate and present their concerns to the Board. While budgetary constraints necessitated a reduced number of meetings in rural areas of Utah in 2004, the Board met in Richfield and Blanding where public comments were invited.

Responding to the challenges facing Utah as its population ages, the Board commissioned the development of four one-page position papers that reflected its opinion on issues that the state needs to attend to, especially in light of the demographic changes that will be exacerbated when the "baby boomers" reach retirement age in 2011.

The position papers included: 1) the need for a Governor's Commission on Aging to Prepare for the Challenges and Opportunities of its Aging Population, 2) In-home and Community-Based Services, 3) Caregiver Support Services, and 4) Transportation issues. A copy of the papers can be found in Appendix I on Page 29.

On an annual basis, the Board is called upon to review and approve the plans that explain how the area agencies on aging will utilize the federal funds allocated to the State in furtherance of the Older Americans Act. The actual format of the plan is developed by the Division and approved by the Board. The Annual Plan for 2004, in addition to reporting the number of services provided to eligible seniors, provided information regarding each agency's accomplishments during the previous year. Appendix II on Page 35 contains a report on the numeric and programmatic accomplishments of each area agency as reported to the Board.

"The Aging Super Highway" Presentations

During 2004, the Division developed a series of PowerPoint presentations to graphically present the challenges that Utah faces as its senior population grows at a rate that is higher than the State's elementary school age population. Titled "The Aging Super Highway", the presentation was designed to provide state and local policy makers a picture of the rapid changes that are occurring among Utah's senior population, the challenges such changes will pose to all levels of government, actions that have already been taken to better understand the effect of this growth, and the issues that continue to need attention. Presentations were given to several key legislative committees including the Executive Appropriation and the Health and Human Services Committee. The "Aging Super Highway" has also been presented to numerous local governmental and civic organizations including the Davis County Board of Supervisors, the Sandy City Commissioners, the Salt Lake County Aging Advisory Council, the Logan Chamber of Commerce and the Six-County Area Agency on Aging Advisory Council. At each presentation, the "Aging Super Highway" was tailored to present national, state and specific local demographic information. The PowerPoint slides are available on the Division website www.hsdaas.utah.gov.

Preparing for the Medicare Prescription Card Program

Early in 2004, Congress passed and President Bush signed the most comprehensive reforms to the Medicare program since the programs inception in 1965. Among the reforms was a prescription program for Medicare beneficiaries to begin in January 2006. To provide some immediate relief, the act provided for a "transitional" program, with an additional benefit for those Medicare beneficiaries who had income at or below the federal poverty level. The "transitional" program, however, required Medicare beneficiaries to select from a large number of "card sponsors". The selection of the "best" sponsor becomes critical because the array of medications and discounts available varies from sponsor to sponsor. Once a sponsor has been identified and selected, the Medicare beneficiary has only a limited ability to change sponsors even if the one selected no longer covers a specific drug needed by the Medicare beneficiary.

At the request of the Centers for Medicare and Medicaid Services (CMMS), the federal agency responsible for implementing the transitional card program, the Division provided training to over 1,000 potential recipients of the transition card. In addition, at the request of Senators Bennett and Hatch and Congressman Matheson, staff of the Division assisted in townhall meetings during which seniors were informed about the transitional card program and encouraged to apply.

Foster Children Transition to Adult Living and Senior Mentors

The Division of Aging and Adult Services, along with other divisions in the Department of Human Services, participated in the Governor's Transition to Adult Living Initiative designed to prepare youth (aged 14-18) and young adults (aged 18-21) growing up in the foster care system to work and/or enroll in higher education. A volunteer mentoring pilot project will utilize retired or soon-to-be retired senior citizens to help youth and young adults transition to adult living. Enthusiastic and understanding older adults at least 55 years of age will befriend them and act as sounding boards and confidants to help the youth navigate and plan their vocational and/or occupational futures. Senior mentors are encouraged to commit at least one year and share their life's work experiences. The association between senior mentors and this age group could result in a lifetime bond.

Assessment of the Legal Needs of the Elderly

The Division's Legal Services Developer undertook a groundbreaking project of surveying the types and frequency of legal problems that seniors encounter. The goal of the legal needs assessment survey, which was conducted in cooperation with Jilenne Gunther, the Borchard Foundation Fellow, was to establish priorities for senior legal services, secure additional resources and determine the barriers to obtaining legal services.

The survey was mailed to 989 seniors in late May and resulted in a response rate of over 66.5 percent. Arrangements were made with the BYU statistics department to analyze and interpret the data at no cost, saving several thousand dollars. The survey was conducted at a cost of less than $1,000 and the data it generated was exceptional. An executive summary of the final report is included in this report as Appendix III on Page 65.

There is considerable national interest in the survey because it appears to be the first legal needs assessment specifically targeted to seniors. Due to that interest, the Legal Services Developer presented the survey's findings at the National Aging and Law Conference in Washington, DC. Several other national organizations including the Center for Social Gerontology and the National Association of Legal Services Developers have expressed interested in the administration of the survey and its results. The Division is pleased to be a leader in addressing the legal needs of seniors. The goal for the coming year is to develop and implement a senior legal hotline. Sixty-nine percent of seniors indicated that a legal hotline is the legal service they desire most.

Urban, Rural and Specialized Transportation Association

During 2004, the Division improved its ability to be aware of current transportation issues affecting the aging community by becoming an active member in URSTA (Urban Rural and Specialized Transportation Association), a Utah based transportation association comprised of a broad cross section of transportation providers in both urban and rural parts of the state. The association's mission is to support a higher quality of life in Utah through the promotion of effective public transportation. Currently, a staff member is on the local URSTA Board.

Information Systems Improvements-NAPIS (National Aging Program Information System)

Staff from the Division as well as several Area Agencies on Aging selected a new computerized reporting system to replace the existing outdated technology. The new web-based system, which is accessible via internet connection from any location in the state, is expected to greatly improve the ability to provide prompt and accurate reporting that meets both state and federal reporting requirements. Equally important is the need to provide the participating AAAs with an analytical tool to enable them to assess, in detail, the services they are providing at the local area levels. The program was operational in the second quarter of Fiscal Year 2005, and will be utilized for monthly and annual reporting and analysis from this point forward. To maintain continuity in reporting, all historical data will be transferred from the existing system.

ADMINISTRATION

The Division receives policy direction from a seven-member Board of Aging and Adult Services appointed by the Governor and confirmed by the State Senate.
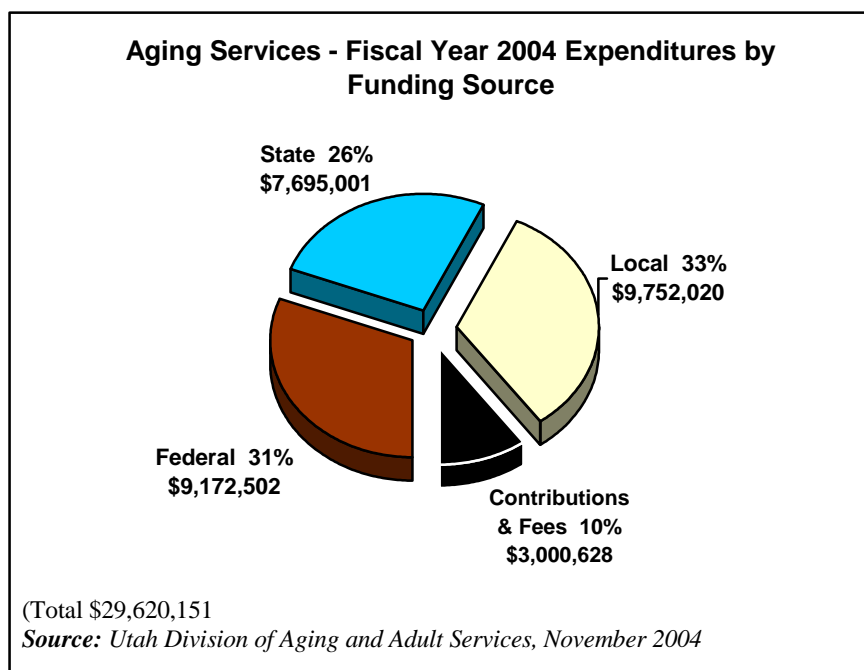
SERVICE DELIVERY

I. AGING SERVICES

The Division contracts with units of local government or Associations of Governments to operate Area Agencies on Aging (AAA). A funding formula is used to allocate funds to the AAAs, who are responsible for the planning, development and delivery of aging services throughout their geographic areas. The AAAs, in turn, contract with local service providers and/or provide services directly to meet the identified needs of their elderly population. The services available within a service area may include, but are not limited to, congregate and home-delivered meals, information and referral, volunteer opportunities, transportation, and a variety of in-home services including Homemaker, Personal Care, Home Health Care, and Medicaid Home and Community-Based Aging Waiver Services. Several other services are available as set by local priorities. A list of AAAs is located on page 73.

A. Funding Aging Services Programs

There is a variety of funding sources for the programs administered by the Division's Aging Services, including federal, state and local governments. The following figure shows the percentage and amount of the total aging services budget that each of the major sources contributes. The federal share is received through allocations authorized by the Older Americans Act. The Utah Legislature appropriates state funds, with local funding coming from counties, private contributions, and the collection of fees.

Aging Services - Fiscal Year 2004 Expenditures by Funding Source

State 26% $7,695,001
Local 33% $9,752,020
Federal 31% $9,172,502
Contributions & Fees 10% $3,000,628

(Total $29,620,151
Source: Utah Division of Aging and Adult Services, November 2004

B. Review of Aging Program Fiscal Year 2004 Activities

The Division of Aging and Adult Services was created as Utah's State Unit on Aging in compliance with the Older Americans Act. By State Statute 62A-3-104, the Division is granted the legal authority to establish and monitor programs that serve the needs of Utah's seniors.

The following is a review of the services available through the Division and the AAAs to help the elderly and their families deal with the challenges created by the aging process.

1. Nutrition, Health Promotion and Disease Prevention

Nutrition

Nutritional well-being is integral to successful aging. However, older persons are at disproportionate risk of developing nutrition-related diseases and disabilities. For minority older persons, differences in longevity disease prevalence and functional status are especially alarming. Research indicates that poor nutritional well-being contributes to:

- poor health outcomes resulting in increased health care costs
- higher morbidity and mortality
- increased functional dependence
- higher rates of hospital readmission
- longer hospital stays.

The Nutrition Program for the Elderly (NPE) monitors the nutritional status of the elderly. The federal government has taken actions acknowledging the importance of nutrition screening by mandating its inclusion under the 1991 Older Americans Act. Preventive health services grants earmarked for the states and funded by the Act must include provisions for the "nutrition screening" of all older participants and provide funds for health promotion. The challenge is to build interdisciplinary partnerships or further develop existing coalitions that unite the public and professionals in delivering nutrition services and health promotion for needed care management. Incorporation of defined risk factors and indicators of poor nutritional status into a plan of care in the Nutrition Programs for the Elderly is addressed. Even when a person comes periodically to the congregate meal site or a person requests home-delivered meals, this is still only one meal per day. The NPE takes responsibility to check on other community resources for nutritional meals and coordinate other needed services to make sure that participants will be nutritionally sound and safe. Nutrition Care Management and Title III C1&2 of the OAA are the only government programs that are set up to inquire and intervene regarding food security for the elderly population.

Congregate Meals	Home-Delivered Meals
The congregate meal program provides one meal a day that meets 33 1/3 percent of the recommended dietary requirements for elderly persons at approximately 100 meal sites across the state. These meals are made available to individuals age 60 and over. Nutrition education is provided to all participants and good health habits are continually encouraged.	The home-delivered meals program provides one meal a day that meets 33 1/3 percent of the recommended dietary requirements for elderly persons who are age 60 or over, home-bound, and have limited capacity to provide nutritionally-balanced meals for themselves. Other in-home services are provided when identified through assessment.
A confidential contribution is encouraged by those who enjoy these meals. The suggested contribution amount is established by the local Area Agencies on Aging. These contributions covered 27 percent of the total expenditures in FY 2004 and are used to enhance the congregate meals program.	Home-delivered meals are delivered to the participants' homes five days a week, except in some rural areas where funding may limit this to only four days a week with a waiver approval. Through the assessment process, an effort is made to assure that those with severity of need receive meals. Contributions are encouraged in an amount set by the local Area Agencies on Aging and go directly to the Home-Delivered Meals Program. In FY 2004, contributions to the program covered 24 percent of the total expenditures. Due to funding limitations, there are still unserved and underserved areas of the state.

CONGREGATE MEALS FISCAL YEAR 2004	
• Undupl. Persons served:	23,966
• Meals served:	903,506
• Total expenditures:	$4,742,836
• Contributions by seniors:	$1,287,251
• Average cost per meal*:	$5.25

HOME-DELIVERED MEALS FISCAL YEAR 2004	
• Undupl. Persons served:	9,162
• Meals served:	1,086,211
• Total expenditures:	$5,865,888
• Contributions by seniors:	$1,408,209
• Average cost per meal:*	$5.40

*Cost includes direct costs (food, labor, transportation), indirect costs (screenings, education), and administration costs.

The following profile of home-delivered meal recipients describes the typical participant and what may be expected in future years. As medical advances allow people to live longer, seniors are experiencing increased chronic illness, which limits their ability to adequately care for themselves. The Home-Delivered Meals Program helps meet the needs of these individuals. An increasing demand for this service is expected.

- Age: 70% are 75 years of age or older.
  40% are 85 years of age or older.

- Female: 75%

- Lives alone: 95%; Requires assistance with ADLs*

- Receives at least five meals per week

- One third of the recipients require special diets (low sodium, high protein, diabetic, etc.)

- Receives nutrition education

ADL = Activities of Daily Living

Health Promotion and Disease Prevention

Use of screening techniques and intervention are incorporated into regular health care programming at senior centers. The preventive health benefits of a well-planned physical activity program provide a healthier and stronger senior thus helping to maintain a better quality of life. Senior centers are appropriate places for educating, and providing factual information that offers a choice of interventions integral to obtaining meaningful living.

The Division of Aging and Adult Services promotes health and disease prevention throughout the state. This past year the number one goal was to promote a self-managed walking program using pedometers as motivation. There are several national programs that have been designed to help seniors become more fit by walking. In Utah, DAAS promoted the "Step It Up" Program, in partnership with the Utah Department of Health, who designed the program. USU Extension was the Division's partner for helping with nutrition education in Utah's 29 counties. Any of the 103 senior centers in the state can help Utahns 60+ begin the "Step It Up" Program by coordinating with the local health department to monitor progress and provide support to participants. This program offers weekly computer tracking services (number of steps, blood pressure and cholesterol levels, weight) and monthly incentives for four months to increase and maintain physical activity by increasing the number of steps walked per day. Senior centers offer programs that provides blood pressure, cholesterol, glucose, arthritis flexibility and pain, and screening tests to help participants make the link between physical activity and improvements in chronic conditions.

The Division serves on the State Immunization Coalition for Adults. The availability of the influenza vaccine became an issue this year. Contamination problems in a British manufacturing facility at Speke, Liverpool, forced the Chiron Corporation of San Francisco, one of only two companies licensed to provide inactivated influenza vaccine in the United States, to withdraw its vaccine (Fluvirin) from the market. The remaining authorized manufacturer, Aventis, was limited in the number of available doses of inactivated vaccine (Fluzone). This problem caused anxiousness among the senior population. The Center for Disease Control and Prevention issued strict guidelines targeting vaccine to those persons who were most likely to have complications of influenza, including severe illness, hospitalization or death. Although it is extremely difficult to prioritize among the subgroups

listed in the recommendations, the risk of influenza-related hospitalization increases among persons older than 65 years of age. The Division played an active role in advising the 12 Area Agencies on Aging with information on CDC's recommendation and providing constant updates for obtaining additional authorized vaccine.

2. The Home and Community-Based Alternatives Program

The Home and Community-Based Alternatives Program continues to provide services to more Utahns than any of the other in-home service program. In 2004, 1,780 individuals received services across the state. The goal of the program is to prevent premature placement in nursing facilities, but additional real benefits to individuals are enhancement of their quality of life and promotion of independence in their own homes.

An array of services is provided to people in their homes, the most important of which is assisting the person or caregiver to connect with needed services. Every area agency in Utah has a professional who specializes in aging issues, understands the local community resources, and is committed to providing excellent service. Although clients must meet age and financial eligibility guidelines in order to receive services in the home under the Home and Community-Based Alternatives Program, it is the most flexible of all in-home programs and, as such, can provide a broad spectrum of services which may include personal care, homemaker services, transportation, respite to caregivers, and chore services. A person can always receive information to secure needed services regardless of income.

This year, the area agency case managers moved forward in the Division's commitment to client-directed care. This model of providing in-home services emphasizes the client's involvement with care planning whenever possible and even supports clients who wish to hire their own care providers. This is another good example of the flexibility of the Alternatives Program.

The Alternatives Program FY 2004		
• Homemaker	• Individuals Served	1,780
• Personal Care and Home Health Aide	• Expenditures: State Funds	$3,784,824
	• Fees	$64,656
• Other Services	Local Funds	$61,634
- Home-Delivered Meals	• Average Annual Cost per Client	$2,197
- Respite/Adult Day Care	• Age of Clients: Under 60	10%
- Transportation	60 – 74	31%
	74 – 84	35%
	85+	24%

3. National Family Caregiver Support Program

As medical advances allow people to live longer, seniors are living with increased chronic illness, which frequently limits their ability to adequately care for themselves. The national prediction is that the number of seniors needing assistance with basic tasks will double between 1990 and 2030. In

response to these data, the aging network has been actively developing in-home and community-based services to create more options for seniors who choose to remain in their homes and communities.

The National Family Caregiver Support Program (NFCSP) was established with the 2000 reauthorization of the Older Americans Act. Approximately $125 million has been appropriated to states and allocated through a congressionally mandated formula that is based on a proportionate share of the 70+ population.

Providing care to a frail, sick, or incapacitated adult or elderly spouse, parent or adult child is a very demanding and exhausting activity, especially when combined with other activities in the caregiver's life. At times, the demands on the caregiver become so great that the caregiver's physical and emotional health and well-being are seriously affected. Services provided through the program enable caregivers to continue to perform caregiving activities for a longer period of time and maintain a healthy balance in their own lives.

Eligibility

The Utah Family Caregiver Support Program differs from other in-home services programs in that these services can only be provided on a temporary and short-term basis, and are available to caregivers of people 60 years of age or older, and to individuals (60+) providing care to a child up to the age of 18. The program enables the caregiver, in consultation with the professional care coordinator, to obtain identified services that will provide relief and enable them to continue their caregiving duties.

Services

The program, currently administered in Utah by the 12 Area Agencies on Aging with local community-service providers, allows for the provision of five basic services to assist family caregivers, including:
- Information to caregivers about available services;
- Assistance to caregivers in gaining access to available supportive services;
- Individual counseling, organization of support groups, and training to caregivers to assist them in making decisions and solving problems relating to their caregiving roles;
- Respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities; and
- Supplemental services, on a limited basis, to complement the care provided by caregivers.

Caregiver Coalition

In response to the multitude of needs of family caregivers, many organizations are developing and implementing programs to support their efforts. While caregivers are the backbone of the long-term care system, there is a lack of a comprehensive approach on reaching out and providing quality and relevant information that supports them in their difficult roles. Often opportunities are lost because efforts are not coordinated and adequately publicized. To address these problems, the Division was an

active participant in the organization of the Utah Coalition for Caregiver Support. The Coalition is composed of caregivers, care receivers and many statewide organizations, both public and private, that provide services for caregivers. In collaboration, the group serves as a catalyst to develop a statewide system to deliver services to caregivers, facilitate and promote discussion or civic action to address the needs of family caregivers, and coordinate programming efforts.

Beginning in March 2002, the Utah Coalition for Caregiver Support grew to include 32 member organizations from around the state. With regular monthly meetings, this diverse group comes together on the issue they all share – caregiving. This Coalition has begun to produce results. A booklet, "Family Caregiving in Utah" was developed to assist caregivers in navigating the caregiving maze and is now in its second printing. This valuable resource guide for caregivers is a result of the collaboration of coalition members, most notably AARP. This booklet can be requested by calling 538-3910.

In a continuing effort to bring information about services and resources to Utah's aging population and their caregivers, the Coalition has collaborated with the Division of Aging and Adult Services to develop a website and a searchable calendar of events. The calendar of events is a centralized place for Utahns to learn about conferences, workshops, classes, groups and other activities across the state that are related to the needs of caregivers. Visit the calendar at www.caregiverevents.utah.gov.

Currently, the Utah Coalition for Caregiver Support works with the Real Choice Systems Change Grant to disseminate information related to caregivers and their needs. The Division's Utah Family Caregiver Support Program is continually exploring new ways to assist caregivers and collaborates with more than three dozen organizations including AARP, The Arc of Utah, and the Division for Services for People with Disabilities to ensure that caregiver needs are identified and addressed.

The following chart details the utilization of services for each of the five categories of services under the Caregiver Support Program.

Service	Total Individuals Served*	Federal Funds	State Funds	Local Funds
Information	9,323	$68,448	$45,145	$16,703
Assistance	2,756	$176,023	$101,176	$46,423
Counseling/Support	1,949	$60,008	$33,899	$6,030
Respite	572	$308,952	$164,305	$35,505
Supplemental Services	410	$18,834	$11,725	$7,774
Funds Expended		**$632,264**	**$356,250**	**$112,435**
Total funding – all sources = $1,100,949				
Average cost per client for respite care = $1,016				
*Duplicated counts due to many people utilizing more than one service				

This is the second full year that the Utah Family Caregiver Support Program was able to collect data in all categories of services.

4. Home and Community-Based Medicaid Aging Waiver Program

For the past 12 years, the Division has been administering the Utah Home and Community-Based Medicaid Aging Waiver Program. The Aging Waiver program provides home and community-based services to individuals who are in the home setting but require the types of services provided by nursing facilities and would be expected to actually enter a nursing facility through the Medicaid program within a very short period of time if they could not obtain in-home services from the wavier program. During the 12 years the program has been operational, 2,690 frail elderly have been served.

In FY 2004, Utah's Home and Community-Based Medicaid Aging Waiver Program served 825 elderly Utahns, enabling them to continue residing in their own homes rather than being placed in nursing facilities.

Aging Waiver services are available statewide to seniors age 65 and over who meet criteria for nursing home admission and Medicaid financial eligibility. Services provided to eligible seniors include homemaker, adult day care, home health aide, home-delivered meals, non-medical transportation, etc.

IOME AND COMMUNITY-BASED MEDICAID AGING WAIVER	
Services Provided:*	
• Homemaker:	62%
• Emergency Response:	64%
• Home-Delivered Meals:	20%
• Adult Day Care:	8%
• Respite and Transportation:	21%
* Most clients receive several services, therefore the total exceeds 100%.	
Cost Data on the Waiver	
Other Waiver Facts:	
• Total individuals served:	825
• Total expenditures:	$3,059,963
• Annual cost per client:	$3,709

CMS-Aging Waiver Audit

In anticipation of the state applying for a five-year extension of the aging waiver program, the program was audited by the Centers for Medicare and Medicaid Services, the federal agency responsible for approving this type of a waiver. In addition, the program was reviewed by the state Division of Health Care Financing, the state Medicaid agency. Both audits were conducted primarily to document the ability of the waiver program to provide services only to those eligible for services and that the level of services provided were in line with the needs of the eligible client and in an acceptable manner. Both the federal audit and the state review reported very favorably on the way the

waiver was implemented and how the clients were served. In fact, the federal audit did not recommend any program improvements.

Outcome Measures

The following chart demonstrates the percentage of eligible clients receiving services in three in-home services programs as of June 30, 2004. The waiting list contains a list of individuals who have requested or their caregivers have requested assistance, and funding is the only factor preventing the agency from providing the requested services.

Approximately 95 percent of those needing services and identified as being eligible for the Aging Waiver and 79 percent of those eligible for the Alternatives Program were served during FY 2004. A much lower percentage (52%) of those seeking respite care were served. Inadequate funding in the agencies on aging was the reason individuals did not receive services.

Percent of Eligible Persons Served by Alternatives, Wavier, and Respite Programs, FY02-FY04

These percentages are point-in-time figures collected on June 30, 2004
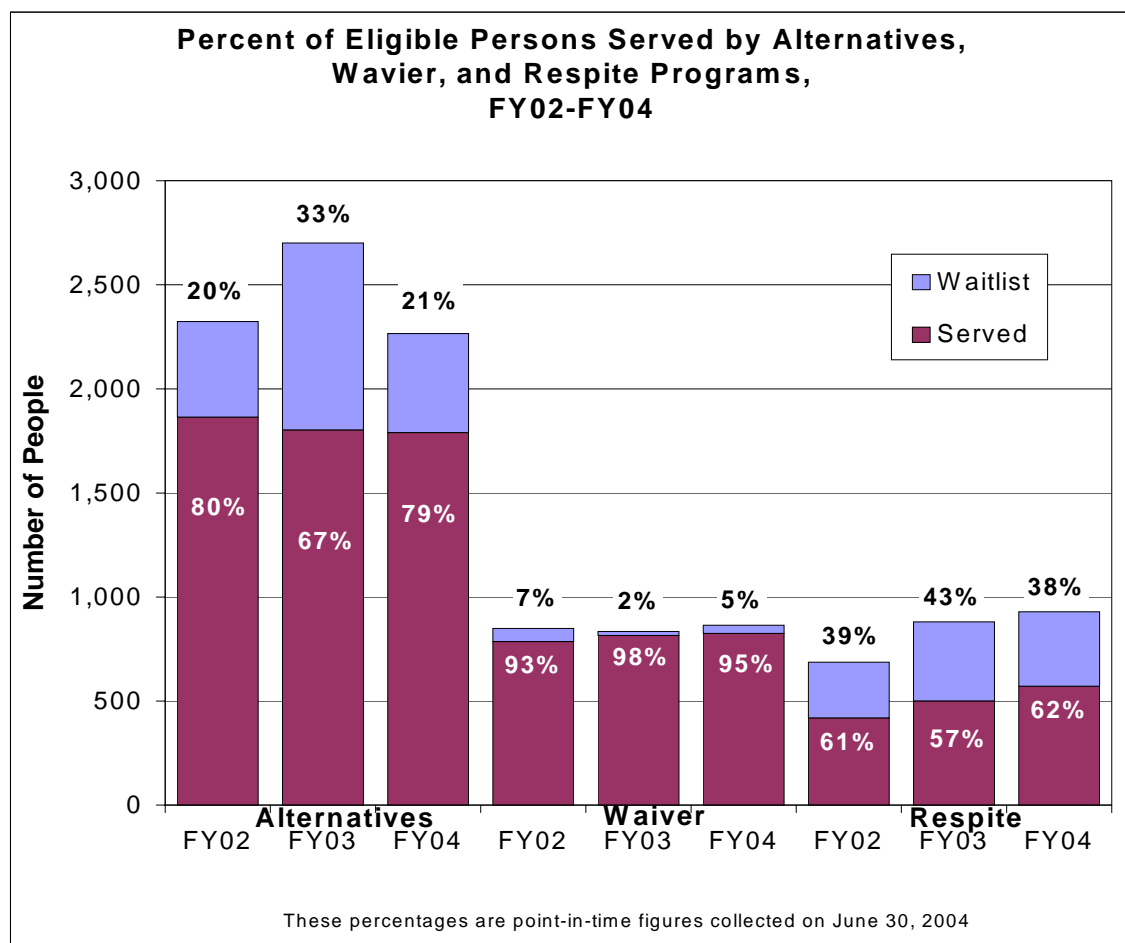
5. Other Older Americans Act Services

Older Americans Act Title III-B funds are used to provide a wide variety of services that enable Utah's seniors to maintain their independence. Remaining at home in a community with which they are familiar is a high priority for Utah's seniors. When illness or disability limits their ability to perform the tasks necessary to live independently, outside assistance is requested. With funds made

available from the Older Americans Act in the categories of access, legal, in-home and optional services, the Area Agencies on Aging provide services aimed at helping families and caregivers maintain seniors in their own homes and communities. The agencies also provide information and presentations on a wide range of topics of interest to seniors, such as health and medical issues, taxes, budgeting and personal finance, insurance, Medicare, estate planning, consumer fraud, etc.

The Area Agencies on Aging also assist seniors with chores that are difficult or impossible for some to do for themselves, such as lawn work, snow removal, and minor house repairs. Friendly visitors, telephone reassurance, and volunteer services do much to alleviate problems that homebound seniors face if they are alone and isolated. Transportation is critical for seniors whose frailty prevents them from driving or who have limited access to public transportation services. The following chart illustrates how these optional services have been used by Utah's seniors during the 2004 fiscal year.

SUMMARY OF OPTIONAL SERVICES PROVIDED UNDER TITLE III-B	
Service	**Units***
• Friendly Visitor	210,975
• Information and Assistance	179,030
• Transportation	287,820
• Telephone Reassurance	59,558
• Chore Maintenance	32,424
• Assessment/screening	21,223
• Shopping	17,494
• Personal Care/home health aide	1,530
• **Total**	**810,054**

*One senior may use multiple units of service.

6. Health Insurance Information Program (HIIP)

The Centers for Medicare and Medicaid Services contracts with the Division of Aging and Adult Services to educate the public about Medicare and its benefits. With the passage of the MMA 2003 and the prescription drug discount card, seniors are even more confused about their benefits. During this year, Division staff trained approximately 150 volunteer counselors for this program. The Division partners with many state, federal and other agencies who participate in the delivery of the training across the state. During this year the HIIP counselors have helped 5,492 beneficiaries with their questions. HIIP counselors have educated 147,356 beneficiaries across the state through public media, presentations or mailings. The Division also participated with the congressional delegation in public seminars across the state concerning the new Medicare Drug Discount program.

7. The State Long-Term Care Ombudsman Program

The Utah Ombudsman program responds to concerns and complaints about the quality of care and quality of life of residents living in long-term care facilities: nursing homes, assisted living facilities, swing bed hospitals, transitional care units and small health care facilities. In Utah, there are 239 facilities with 12,591 licensed beds. The state program currently has 6.7 FTEs responding to all the complaints and doing investigative and advocacy work for the entire state of Utah. Ombudsmen have responded to 1,719 cases and 3,698 complaints this last year. Due to a new national consistency-

reporting program, the method in which cases and complaints are counted has changed. Now, altercations between residents will not be counted, thus making the number of complaints less than previous years. However, the workload for local ombudsmen continues to grow with more visits to assisted living facilities and a rise in the seriousness of cases. Volunteers have given the program a needed boost by visiting the facilities and doing some excellent work.

8. Title V: Senior Community Service Employment Program (SCSEP)

The Senior Community Services Employment Program (SCSEP), Title V of the OAA is a job training program for seniors over the age of 55 years. The program places seniors in a community service setting to obtain work skills necessary for job placement in the regular work community. During Fiscal Year 2004, Utah finished the year with a job placement rate of 59.04 percent which was the highest placement rate in the country. In addition, the year ended with a total served rate of 226.51 percent which ranked third in the country. SCSEP had major legislative changes during the last year, requiring the Division to implement new state rules to reflect the changes in the federal SCSEP program. The Division also coordinated the development of the Coordinated Services State Plan for the Department of Labor.

SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM	
• Persons served	212
• Persons placed in unsubsidized employment	72
• Expenditures	$567,440
• Annual cost per enrollee	$2,677

THE AVERAGE TITLE V ENROLLEE	
• Age: 55–59	28 %
• Female	70 %
• High school graduate	31 %
• Annual income below poverty level of $8,240	95 %
• Minimum Title V wage	$5.15 per hr.

9. Legal Assistance Services: The Role of the Legal Services Developer:

The Older Americans Act has deemed senior legal assistance a priority service. Accordingly, the Act requires that each state employ a Legal Services Developer to ensure priority be given to senior legal assistance programs. The Act requires the establishment of legal services related to income assistance, health care, long-term care, nutrition, housing and utilities, protective services, defense of

guardianship, abuse, neglect, exploitation, and age discrimination. The role of the Legal Services Developer is to (1) provide state leadership in securing and maintaining the legal rights of older persons; (2) coordinate the provision of legal assistance programs; and (3) improve the quality and quantity of services by developing a comprehensive system of legal services targeting older persons in greatest social and economic need while providing an array of legal services to all older Utahns.

The Legal Services Developer is pursuing an initiative of establishing a network of pro bono attorneys in the rural areas of Utah. Thanks in large part to the efforts of the former Legal Services Developer, Salt Lake County and parts of the Wasatch Front have a well-developed pro bono program, including attorneys who volunteer in senior centers. The Developer is working to expand this type of program into the majority of senior centers throughout rural Utah. The plan is to implement a program wherein every senior center has a relationship with a local attorney that will volunteer pro bono legal services to the senior center.

Other important initiatives and programs include ongoing work with several legal services providers and elder law stakeholders, such as Utah Legal Services, the Bar Association's Needs of the Elderly Committee, and the Attorney General's Multi-Disciplinary Team.


II. ADULT PROTECTIVE SERVICES

The Division of Aging and Adult Services is responsible for the administration of Adult Protective Service Programs (APS). Within the administrative structure of the Division, there is a Director of Adult Protective Services who has statewide administrative responsibility for the program. Adult Protective Services are delivered by Division staff through APS Regional Offices. A complete list of the APS Regional Offices is located on Page 75.
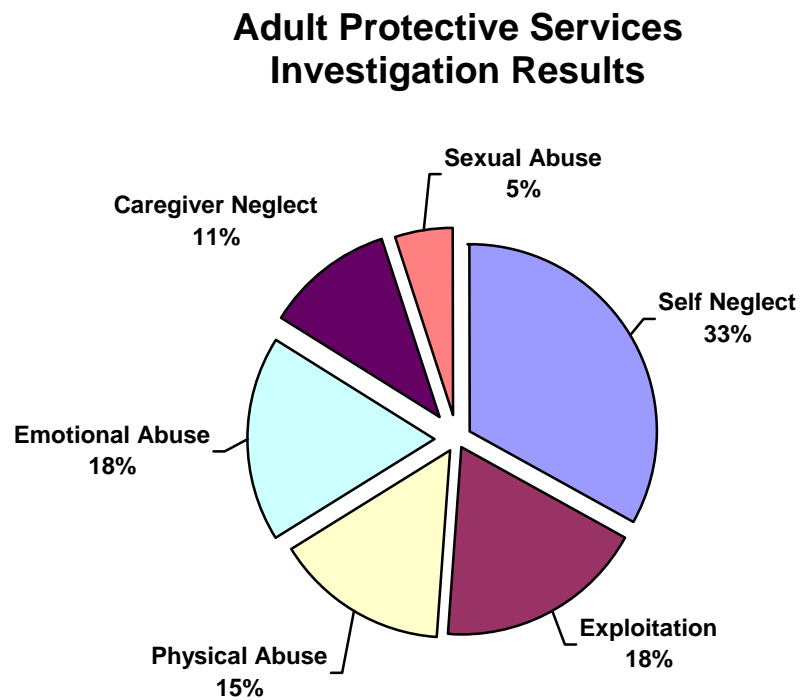
Federal and state statutes require that vulnerable adults, including elderly and mentally or physically impaired adults, be protected from abuse, neglect and exploitation. Adult Protective Services is mandated to investigate allegations of abuse, neglect and exploitation of any vulnerable adult. Adult Protective Services' investigators are located throughout the state and intervene to stop the abuse, neglect and exploitation and provide services or referrals to vulnerable adults or their families for services which will protect them from further harm.

Participation in services provided by the Division through Adult Protective Services is voluntary on the part of the vulnerable adult, unless mandated by a court order. Any services provided to the vulnerable adult are to be paid by the person whenever possible. Most people are referred to community programs for assistance. If community services are not available, short-term limited services may be provided by Adult Protective Services. Adult Protective Services encourages the vulnerable adult, families and other agencies to assume as much responsibility as possible for the care and protection of these individuals.

Abuse, neglect and exploitation of vulnerable adults continues to be one of society's most alarming problems. The following chart reflects the number of investigations completed by Adult Protective Services.

Adult Protective Services Investigations

	FY 2002	FY 2003	FY 2004
	2057	2296	2340
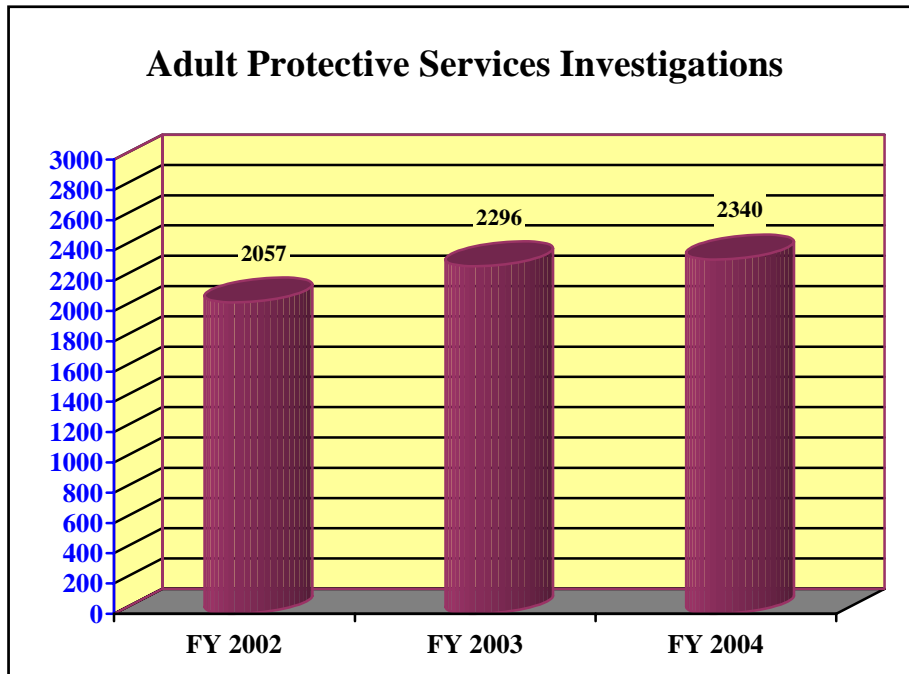
The following chart shows the results of investigations by type of substantiated allegation during FY 2004.

Adult Protective Services Investigation Results

- Sexual Abuse 5%
- Caregiver Neglect 11%
- Self Neglect 33%
- Emotional Abuse 18%
- Exploitation 18%
- Physical Abuse 15%

A. Investigation

Utah has a mandatory reporting law that requires anyone who suspects that abuse, neglect or exploitation of a vulnerable adult is occurring to report the situation to either law enforcement or the local Adult Protective Services Intake 800-371-7897. Upon receipt of a report of suspected abuse, neglect or exploitation of a vulnerable adult, statute requires that APS conduct an investigation to determine the validity of the allegations. If it is determined that abuse, neglect or exploitation has occurred, the Adult Protective Service worker will assess the situation and recommend a course of action that will protect the individual from further abuse. State statute requires law enforcement to conduct an investigation on identified perpetrators and to file criminal charges when the evidence supports that action.

The following charts illustrate a profile of the Adult Protective Services clients and perpetrators.

Typical Client	
Age: 70 – 79	32%
80 – 89	25%
Female	63%
Self-Neglecting	32%
Lives In Own Home	73%
Prior Referral	30%

Perpetrators	
Age:	
Under 30	25.4%
30-39	17%
40-49	17%
50-59	22%
Relationship To Victim:	
Family Member/Relative	59%
Unrelated Non-Caregiver	28%
Paid Caregiver/Non-Relative	13%

B. Training

It is estimated that only one in ten cases of abuse, neglect, or exploitation of vulnerable adults are ever reported to the proper authority. Low reporting may be a result of lack of awareness/education regarding the program. During FY 2004, the state continued efforts to enhance awareness pertaining to vulnerable adult abuse and to the recent revisions made to the Civil and Criminal Law (U.C.A. § 62A-3-301 and U.C.A. § 76-5-111). The program has provided 287 hours of training to approximately 4,000 individuals throughout the state, including, but not limited to, law enforcement officials, first responders, long-term care professionals, home health professionals, medical professionals, financial institutions, and senior citizens. Education, collaboration, and cooperation continue to be pertinent elements in recognizing and preventing vulnerable adult abuse.

C. Family Support Program

The services of the Family Support Program provide payments to increase the capabilities of families to care for eligible Adult Protective Services clients in a family setting when no other services are available. These services are intended to maintain the client in a family member's home and prevent premature institutionalization.

D. Emergency Protective Payments

Emergency Protective Payments are issued to eligible individuals in emergency situations to provide for essential life-sustaining needs. Payments are intended to assist the client in avoiding a situation that could lead to a protective need or premature institutionalization. Payments assist with services such as emergency shelter, utilities, and clothing. When feasible, the client repays the funds received.

APPENDICES

Appendix I

BOARD POSITION PAPERS

Utah Needs a Governor's Commission on Aging to Prepare for the Challenges and Opportunities of its Aging Population

Although Utah has the second youngest population in the United States, its 65 years and older population is the sixth fastest growing. Utah is also tied for second place for life expectancy. Over the next twenty-five years, as "baby boomers" reach retirement age, Utah's 65 years old and over population will increase by over 165 percent, swelling to over 550,000. Starting in the year 2015, one person in Utah will turn 65 years old every 23 minutes.

This increase in Utah's senior population will occur at the same time that Utah will be experiencing a rapid increase in its school-aged population.

No other state in the nation will experience such dramatic increases in both its young and senior population.

Challenges and Opportunities:

If Utah is to meet the challenge of concurrently providing for its "baby boomer" and school age populations, it must take full advantage of what time is available to more fully understand and plan for its response. A Commission on Aging, composed of business, political, religious and civic leaders should be convened by the Governor and charged with recommending:

- How state and local governments, working in partnership with all segments of our State, can better coordinate efforts to provide needed services and supports;
- How business opportunities can be expanded to meet the financial challenges of providing for an expanding number of seniors and school age youth;
- How our public and private transportation systems can be expanded and coordinated to more adequately support the needs of seniors that are no longer able to drive;
- How the benefits of our health care system, including access to affordable prescription drugs, can be maximized to meet the needs of our senior citizens, many of whom suffer from chronic illness;
- How housing options can be expanded to meet the changing needs of an aging population;
- How "baby boomers" and younger populations can be supported in their ability to meet their long term financial needs.
- How the one in four adults caring for an elderly person can be supported in their care-giving duties.

Utah has always prided itself in being able to provide for its citizens. Our senior citizens often face difficult health care, economic and transportation issues that threaten their independence. With adequate planning and attention we can insure that our seniors have the quality of life they deserve.

08/31/04

Caregiver Resources: Supporting Those Who Care For Utah's "Greatest Generation"

Government and businesses must prepare to provide resources for caregivers who face the responsibility of caring for an older parent, relative or friend.

The Facts Clearly Show a Compelling Need for Caregiver Support

- One in four American adults are long-term caregivers.
- Nearly two-thirds of adults under 60 believe they will have to care for an older relative in the next ten years.
- Nationally, family caregivers provide $257 billion worth of unpaid care and support.
- This amount is more than double the annual spending on home care and nursing home care combined.
- Total lost productivity due to care giving exceeds $11.4 billion per year.
- The replacement cost for an experienced employee is 93 percent of the employee's salary.

The Government and Employers can Support Caregivers in the Workplace

Clearly, caregivers need support in the workplace. Employers should make needed elder care information, such as accessing assistance, home care, respite, bill paying and other services available to employees.

But information is only the beginning. On-site care management for employees through Human Resource agencies could include benefits such as community referral assistance, in-house caregiver support seminars, group legal services, and flexible work schedules. These benefits may help employees maintain a healthier balance between work and other responsibilities, and in turn, employers enjoy a healthier, more productive workforce.

Supporting Caregivers Provides an Immediate and Tangible Benefit

Employees that receive on-site care management services may be less likely to quit due to the stress of care giving. Employers can help employees identify and access resources – thereby decreasing their burden and allowing them to focus on their work.

Employers can retain valuable, experienced employees by creating flexible work schedules, including part-time options. Flexibility can allow employees to assist care receivers with their needs while maintaining positive work habits.

Making the Right Moves to Support Caregivers

Working together, the State and the business community should:

- Provide information regarding caregiver support programs
- Develop tax-incentives for employers who support caregiver support programs
- Provide tax credits for family caregivers
- Establish on-site care management services for employees
- Develop and maintain a web-based caregiver assistance resource site

08/31/04

Improving Home and Community-Based Services for Utah's Seniors

Utah has traditionally emphasized meeting the needs of our children, but we actually rank sixth nationally in the percentage increase in its population over the age of 65. Between the years 2000 and 2030, the 65 plus population is projected to grow 123 percent, a rate faster than our elementary school aged population. Thus, there is a clear need to focus on senior needs as well as children.

Unfortunately, longer life spans often mean an increase in chronic conditions. For example, 39 percent of individuals over 70 require one or more assistive devices to meet their needs. Additionally, 50 percent of people 85 and older will develop Alzheimer's disease.

Most people say that they do not want to "end up" in a nursing facility. Fortunately there are many options for long term care in our state. Where, not long ago, the choices were living with one's children or going to "the rest home," many Utahns today can age at home with the assistance of in-home service providers.

Family caregivers provide much of the in-home care needed by their loved one to remain at home as they age. Care through public and private in-home service providers is not meant to replace the family, but to supplement family care, thus allowing the individual's health and safety to remain intact while they age at home.

In-home services programs provide benefits in at least three important ways:

- Improving quality of life: the individual can age in the place of their choosing, with the dignity and respect they deserve.
- Empowerment and control for consumers and their families for as long as possible. With professional case assistance, clients are able to choose the types of services needed and whom they want to provide the services.
- Diversion from early nursing home placement saves public funds. Nursing home placement in Utah averages $43,416 annually. In home services programs cost $2,200 – $3,100 annually.

In-home and community programs allow older people to avoid premature institutionalization. Some of these services are available to individuals 18 and older but the majority of public funding serves those 60 years and older.

Funding these programs is unique in that it draws on federal, state, and in some places, county dollars. The demands for in-home services will continue to increase as our aging population increases.

The current systems are barely adequate to meet the needs in 2004, and our systems of service delivery, housing and medical care for seniors will certainly be overwhelmed by the upcoming surge of aging "baby boomers". It is essential to begin to plan now.

08/31/04

Transportation issues among the aging population

With the aging of the "boomer" generation (birth years 1946-1964) the impending increase in the senior citizen population over the next 20 years will bring increasing demands on an already inadequate transportation system.

- The ability to remain independent in terms of living arrangements and the ability to care for oneself is a strong desire among the senior population. One of the primary contributors to continuing independence is the ability to use transportation to avoid becoming dependent on others for shopping, recreation, and most importantly; medical care.
- The most common means of transportation is still the individual licensed automobile driver. At the beginning of Fiscal Year 2004, drivers over age 40 represented 46 percent of all licensed drivers in Utah. The 40-59 years old group ("baby boomers") are nearly two-thirds of this group (65%) and will be aging into the 60+ bracket in the next two decades.
- Aging drivers will become a perceived safety issue as an increasing number of aging drivers continue to drive their own vehicle beyond a time when they may do so safely. Most often because no alternative transportation exists.
- The rare but highly publicized accidents involving older drivers will continue to lead to pressures to establish more stringent licensing requirements, further reducing elderly mobility if no alternative public transportation is made available.
- Elderly in the rural areas of the state have additional roadblocks to remaining independent, since many of their family members, upon whom they could rely for transportation assistance, have moved away or pre-deceased them; and public transportation is severely limited if it exists at all. Low population density and significant travel distance to services compound the expense of providing transportation.
- In urban areas, services such as those provided by the Utah Transit Authority, continue to expand, but will not be able to keep pace with the aging population's transportation needs without substantial increases in funding. Additionally, programs emphasizing "mainstreaming" of disabled individuals from paratransit to fixed route services to reduce operating expenses may actually be reducing options for the disabled elderly and the disabled population in general.
- While federal funds to purchase ADA equipped vehicles through the Federal Transportation Administration (FTA) have increased by three to six percent per year for the last several years, the lack of state and local fund increases has resulted in agencies being unable to accept new equipment to expand service because they can not supply the matching funds requirement (20%), and/or are unable to fund the associated driver, maintenance and insurance costs to accept FTA funded vehicles. The previous fiscal year has seen several AAAs and senior centers turn down offers of equipment from UDOT due to lack of this supportive funding.

A study documenting the impending transportation needs of the "baby boomers" is needed to permit the state to put into place those programs to ensure the adequacy of Utah's transportation system.

08/31/04

Appendix II

AREA AGENCY ON AGING REPORTS

BEAR RIVER AREA AGENCY ON AGING – FY 2004

Counties
Box Elder
Cache
Rich

Populations

Total	136,097	26% growth (1990-2000)
60+	14,901	20%
65+	11,259	19%
75+	5,461	24%
85+	1,585	50%

Minorities

60+	657
65+	454

Program	Number of Clients
Home-Delivered Meals	731 (90,471 meals)
Congregate Meals	1,954 (82,199 meals)
Alternatives Program	58
Medicaid Aging Waiver Program	53
Caregiver Respite	23

Other services provided with Title III-B	Number of service units
Friendly visitor	12,895
Education and training	19,544
Information and assistance	16,425
Transportation	9,566
Telephone reassurance	4,272
Outreach	2,364
Assessment/screening	2,082
Shopping	395
Personal Care/home health aide	323
Chore maintenance	194

The following were accomplishments listed by the Bear River Area Agency on Aging in their annual plan update, May 2004.

- The Bear River Valley Senior Center in Tremonton has completed the project with the sate office to be wired for computers. In addition to becoming "wired" for computers, a desk, printer, and computers have been provided to help develop the computer lab. The center is still looking for a teacher to help develop interest in the computer services now available.

- The Brigham Senior Center became a member of the Chamber of Commerce this year and has developed a new website www.bcseniors.org.

- The Cache County Senior Center has worked with Easter Seals to place three seniors in employment. Two seniors are placed at the senior center and one is working with the local volunteer center.

- The Bear River AAA has conducted two caregiver focus groups this year. One group was conducted in Brigham City and the other was conducted in coordination with the Hispanic services coordinator at the Bear River Health Department and Utah State University for Hispanic caregivers. Both groups provided good insight into the types of services, issues, and concerns that are encountered in their local communities. We will continue to work with local leaders in the Hispanic community to gather additional information and develop an implementation plan for appropriate services.

- Our agency has also participated with the Cache Valley Caregivers Consortium to provide two caregiver workshops with information on Alzheimer's Disease, legal issues for caregivers, mental health issues, and caring for yourself as a caregiver. Both workshops have been well attended with 50-60 participants at each event. These workshops are held in addition to ongoing caregiver support groups.

- The Brigham City Senior Center partnered with the sate arm wrestling association in a fundraising event entitled "Muscle Up for Meals on Wheels" held during Peach Days. Wrestlers donated their entry fees for the competition. The event raised nearly $3,000 and will be repeated next year.

- The waiting list for the Aging Medicaid Waiver program has been eliminated this year.

DAVIS COUNTY AREA AGENCY ON AGING – FY 2004

County
Davis

Populations*

total	238,994	27%	growth (1990-2000)
60+	24,045	44%	
65+	17,540	52%	
75+	7,565	88%	
85+	1,694	93%	

Minorities

60+	1,534
65+	1,057

Program	Number of Clients
Home-Delivered Meals	668 (64,241 meals)
Congregate Meals	2,378 (86,464 meals)
Alternatives Program	213
Medicaid Aging Waiver Program	52
Caregiver Respite	88

Other services provided with Title III-B	Number of service units
Friendly visitor	53,210
Education and training	26,612
Information and assistance	16,527
Transportation	15,521
Telephone reassurance	13,909
Outreach	9,255
Assessment/screening	1,965
Shopping	866
Personal Care/home health aide	666

*Population numbers are from the 2000 census. The age groupings cannot be added for a cumulative total.

The following were accomplishments listed by the Davis County Area Agency on Aging in their annual plan update, May 2004.

- The agency has progressed significantly during this past year. Personnel changes have been made to improve the competency and capacity of the agency.

- County financial contributions to the budget has increased.

- The Title V Program and Easter Seals older workers program has been a major contributor to additional personnel at the Farmington Office and in the Senior Activities Centers.

- Local Automobile dealers are participating to help the agency replace home-delivery meal vans

- The Advisory Board is directing a fund raising campaign to assist the agency in meeting unmet needs.

- We continue to work with city councils: (1) to have a city council member assigned to aging concerns and (2) to select a representative from their city to serve as a member of the Department of Aging Services Advisory Board. This board has become a valuable asset to the Department. The only disappointing item is that it is difficult to keep the board positions filled with for a reasonable length of time not only with some city representatives but also with minorities.

FIVE-COUNTY AREA AGENCY ON AGING – FY 2004

Counties
Beaver
Garfield
Iron
Kane
Washington

Populations

Total	140,919	69%	growth (1990-2000)
60+	26,261	70%	
65+	20,746	74%	
75+	9,486	99%	
85+	2,109	123%	

Minorities
60+   739
65+   491

Program	Number of Clients
Home-Delivered Meals	1,610 (127,492 meals)
Congregate Meals	4,640 (72,333 meals)
Alternatives Program	67
Medicaid Aging Waiver Program	140
Caregiver Respite	61

Other services provided with Title III-B	Number of service units
Friendly visitor	41,864
Education and training	2,061
Information and assistance	58,786
Transportation	36,267
Telephone reassurance	34,094
Outreach	2,005
Assessment/screening	2,950
Shopping	7,295
Personal Care/home health aide	0
Chore maintenance	27,069

The following were accomplishments listed by the Five-County Area Agency on Aging in their annual plan update, May 2004.

Our major accomplishments for this past year have been in the area of improving upon existing service delivery as opposed to expanding services and adding new services. We have been especially excited about the following two accomplishments within our Title III service delivery system.

- Washington County passed a bond election to construct a new senior citizens center in St. George. The center has now been built and is functioning. It is a beautiful center and will be a great asset for the elderly population of the St. George City area.

- The Steering Committee of the Five-County Association of Governments has approved the purchase of "Hot-Shot" type delivery trucks for all the senior citizens centers in the Five-County area with the exception of St. George City. These trucks will be purchased over the next few months with CDBG block grant funds. St. George City will be working with the Senior Center in St. George for the same type of purchase, as their CDBG funding allocation comes directly to the City and not through the regional funding allocation the other centers have access to. We are very excited about upgrading our delivery of Home-Delivered Meals in the Five-County area.

Case Management/In-home Programs

The Senior Companion Program continues to be an invaluable support and resource to our communities. Without the services of this program many of the seniors in our community would be sitting on waiting lists hoping to be provided the help they need. The program continues to grow and be successful through the efforts of the AAA Staff, The Volunteer Center and many hard-working, dedicated volunteers in our community who have provided friendly visiting, shopping, respite, light housekeeping, meal preparation, and transportation to meet needs of the frail elderly and disabled adults in their communities.

We continue to enhance and increase community awareness of resources and services available to seniors and caregivers in our community. We planned and sponsored a day-long training for providers of Home and Community-based services. This training included information regarding Five-County Programs and services, caregiver issues, training by APS, Medicaid as well as information regarding community resources and environmental adaptation and equipment. The Training was very successful with over 75 people in attendance. As part of this training we developed a power point presentation to go along with the training and for future trainings. In addition to this training, we cosponsored several other trainings, including two Caregiver Trainings in collaboration with the Alzheimer's Associations; with over 150 participants. As part of this push to provide more community awareness and outreach; we put together a Caregiver Handbook, which we have disseminated at trainings, health fairs, community events, and made available to providers and other community resources to distribute to their consumers. In addition, we distribute an informational newsletter to caregivers on a monthly basis. This newsletter not only provides information and tools to help caregivers improve their knowledge and enhance their skills related to caregiving; but to also provide information regarding local resources. We are currently distributing almost 200 newsletters per month.

This past year the Aging Unit actively participated in the planning of Senator Orin Hatch's first Senior's Conference in Southern Utah. In particular, the Aging Program Coordinator for Five-County was in charge of organizing the resource booths for the conference. The conference was a success with over 500 people participating in the conference. Five-County was commended for their efforts in helping make this conference a success and in particular for its efforts in organizing the resource booths.

Over the past year, we have developed a successful Caregiver Advisory Council with active participants. As part of this Advisory Council, we have developed a vision, mission statement and goals for the Caregiver Program. Five-County was the first Caregiver Support Program to develop and distribute a caregiver needs assessment. We had 117 surveys returned for compilation. This needs assessment has provided us with some valuable information, which was compiled in a report presented to our advisory council and DAAS. In addition, we recently developed and sent out a Client Satisfaction Survey for our Caregiver Support Program. We are currently in the process of gathering and compiling this information.

In addition to the trainings listed above, we have participated in several other trainings, health fairs and public events throughout the year to provide information and public awareness about services and resources for the frail elderly and caregivers in our community. In addition, we continue to gather and enhance our resource/lending library and provide awareness of the availability of these resources.

We continue to bring on new providers to better meet the needs of our clients and provide additional options and resources. We set up a new homemaking and chore service provider as well as a home health company. In addition, as part of our efforts to enhance resources and look for non-traditional support services to meet the needs of our consumers, we were successful this year in setting up a hot meal contract with a local restaurant in a very remote and rural area of the region to enable clients to access secondary meal options. We have also added an additional respite contract and a new medical supply and equipment contract.

We continue to have a shortage in Adult Day Care resources in our Five-County Area. With the development of Adult Day Services through TURN Community Services in St. George and the Alzheimer's association, it is hoped that we will be able to tap into this resource for our consumers. In addition, we hope to be able to develop some additional Adult Day Care programs in the rural areas of the region. In addition to Adult Day Care services, we would like to increase services in the area of respite care, chore services, hot meal options and self-directed care, especially in the rural areas of the region.

Our case managers continue to have good working relationships with the local Senior Centers and they have been an invaluable support and resource for the CM and Client; especially in the rural areas. Case managers continue to work with Red Rock Center for Independence and the Home Program to assist clients in obtaining home improvements and home modifications. The case management staff continues to research new services and access informal and non-traditional services to meet the needs of the clients. Over the past year Case Management staff have increased the use of the self-directed care model through the use of the Personal Attendant Care Services. We have found the self-directed care model to be most successful when there is an active caregiver and in more rural areas where traditional resources are less abundant.

MOUNTAINLAND AREA AGENCY ON AGING – FY 2004

Counties
Summit
Utah
Wasatch

Populations
Total	413,487	43% growth (1990-2000)
60+	35,051	28%
65+	26,233	30%
75+	12,101	41%
85+	3,134	76%

Minorities
60+ 1,551
65+ 990

Program	Number of Clients
Home-Delivered Meals	89 (118,156 meals)
Congregate Meals	3,449 (181,949 meals)
Alternatives Program	109
Medicaid Aging Waiver Program	129
Caregiver Respite	30

Other services provided with Title III-B	Number of service units
Friendly visitor	184
Education and training	165
Information and assistance	2,124
Transportation	6,106
Telephone reassurance	0
Outreach	347
Assessment/screening	0
Shopping	0
Personal Care/home health aide	522

The following were accomplishments listed by the Mountainland Area Agency on Aging in their annual plan update, May 2004.

- The Mountainland Department of Aging and Family Services has successfully reorganized itself as a means to better address program management. Staff are more clearly paying attention to the details of compliance matters, and that, together with a noted increase in attention to details by monitoring staff of the Utah Division of Aging and Adult Services, has served to improve the department's service to clients.

- The outreach events that were held in connection with county fairs were successful in terms of new contacts with clients and caregivers; the investment of staff time, however, was excessive for the return. The counties of necessity must expect a booth to be staffed the entire time a fair is open, and that requirement, even with volunteers augmenting staff, turned out to be a burden that the department does not plan to assume in the future. During the new year, outreach events will either be held as stand alone events, or will be tied to brief activities.

- The advisory council has formed a task force on transportation for elderly and handicapped that has met twice and has developed a plan for a survey with intent to formulate a plan of action. Task force members include UTA, UDOT, UDHS, and other knowledgeable officials. The plan of action is to be submitted by June 2004.

- Public awareness of Older Americans Act programs has continued. Journalists from local media are making regular inquiries to obtain the opinions of staff on various issues that come to their attention. New articles on AAA services and other senior and editorial comment on the daily challenges of the elderly. Many other media articles are intended for this year.

- The standing of the AAA in the community has noticeably improved over the past few years. Elected officials know what a AAA does, and seem to be supportive in most respects. Some have expressed appreciation for the acknowledgement given them as the overseers of the programs, and they take an active role in developing plans and formulating policy. The Mountainland Department of Aging and Family Services currently enjoys a good reputation among the legislators, county commissioners, county council members, mayors, and city council members who are elected in the three MAG counties.

SALT LAKE COUNTY AREA AGENCY ON AGING – FY 2004

County

Salt Lake County

Populations

Total	898,387	24%	growth (1990-2000)
60+	97,413	17%	
65+	72,680	19%	
75+	34,610	37%	
85+	8,597	49%	

Minorities

60+	10,287
65+	6,876

Program	Number of Clients
Home-Delivered Meals	2,105 (253,223meals)
Congregate Meals	5,254 (183,850 meals)
Alternatives Program	296
Medicaid Aging Waiver Program	222
Caregiver Respite	177

Other services provided with Title III-B	Number of service units
Friendly visitor	0
Education and training	662,522
Information and assistance	27,388
Transportation	119,743
Telephone reassurance	0
Outreach	0
Assessment/screening	3,231
Shopping	0
Personal Care/home health aide	0
Chore maintenance	4,512

The following were accomplishments listed by the Salt Lake County Area Agency on Aging in their annual plan update, May 2004.

- The Caregiver Support and Elder Abuse Program launched an Identity Theft Prevention campaign in collaboration with the Utah Attorney General's Office. Presentations were made in our senior centers on the basics of identity theft and what seniors can do to protect themselves against this crime. This was halted when the State chose to take back Elder Abuse funds.

- Volunteers continue to play a major role in our continuing efforts to serve the growing older adult population. Aging Services involved a total of 4,082 volunteers who gave a total of 496,903 hours during 2003. Among the volunteers are: Volunteers in the Meals on Wheels Program delivered 35 percent of all program meals; 81,907 meals were delivered by volunteers. Volunteers in the Senior Transportation Program provided 8,922 rides (18 percent of all rides provided by the program.)

- Aging Services received funding for one of eight Legacy Corps for Independent Living Programs in the nation. This is the first use of older adults as AmeriCorps members. Is uses seniors to provide respite care.

- The Senior Transportation Program was awarded the Utah Urban, Rural and Specialized Transportation Association's 8th Annual Kay Draper Award for "Outstanding Transit System in Utah for 2002."

- We held a conference for Latino caregivers of older adults – "Embracing the Caregivers." Breakouts, presentations and materials were presented in Spanish and English.

- The fifth annual Senior Expo was held at the South Towne Exposition Center on October 17th & 18th; over 6,000 people attended. Over 30 free or low cost health screenings were offered and flu shots were also given.

- We worked with the Division of Substance Abuse and the College of Pharmacy at the University of Utah to pilot a "Med Check Project" for older adults. The project uses pharmacy students to help review senior's medications and alert them to possible interaction problems, outdated medicines, and generic medications that may help lower the cost of their drugs.

- The 2003 edition of the 55+ Senior Resource Directory was printed; 40,000 copies were distributed throughout the County. Sponsorships from local businesses underwrote the full $50,000 cost of printing the Directory.

- The Senior Transportation Program Volunteer Component received Salt Lake County's "U-Can-Do Award" as the County's outstanding volunteer program. This project has become a model for new volunteer programs nationwide. Irene LeFevre, the volunteer coordinator at the Friendly Neighborhood Center, was also recognized as the County's Volunteer Coordinator of the Year.

- The Long Term Care Ombudsman Program received 842 complaints in 2003. Trained and certified Ombudsman volunteers handled 273 (32%) of these complaints.

- We received notification from the U. S. Dept. of Labor that our Senior Employment Program was responsible for all the unsubsidized placements for the State of Utah in 2002 (a total of 72). DOL also announced that for the second year in a row, the State of Utah took 1st place in the nation in unsubsidized

placements. In addition, we also took 1st place in the category of program utilization (269%) for Program year 2002.

- In September, John Flinders, of our Transportation Program, competed in and won the Utah Urban, Rural and Specialized Transportation Association (URSTA) "Van Driver Roadeo." The annual event is for van and bus drivers to test their skills with competitors from around the state. John took first place in the competition and earned the right to compete in the CTAA national competition in Seattle in May, 2004.

- The division completed an extensive remodeling of the first floor of the Friendly Neighborhood Center. It was the first significant remodeling done since 1978. It was funded by Salt Lake City, Salt Lake County and a bequest by a former participant at the Center.

- In January, 2004, Aging Services initiated a major effort to improve the ability of staff to work together and to improve the image of the division in the community. This "branding" effort will continue throughout FY2005.

NEW INITIATIVE -- SECOND MEALS IN SENIOR CENTERS

During FY2005, Salt Lake County Aging Services will explore the possibility and feasibility of providing a second congregate meal in selected senior centers. During the next two months we will determine: which center(s) will be involved in this initiative; establish specifics regarding the second meal that will be provided to participants; develop a second meal policy (per Section R510-104-8 of the State Rules for Nutrition Programs for the Elderly) in order to qualify second meals in the local meal count reports for USDA reimbursement; and establish written program objectives which are specific, verifiable, and achievable for nutrition service providers, including the number and frequency of meals to be served at each designated senior center. Toward this end, Salt Lake County Aging Services establishes the following objective in its Area Agency on Aging Four-Year Plan (Second Year of the Plan – Fiscal Year 2005):

Title III C-1 Program Objective: Congregate Meals/Second Meal (1 meal):

Provision to an eligible client or other eligible participant at a nutrition site, senior enter or some other congregate setting, a meal which:
a) complies with the dietary guidelines for Americans (published by the Secretaries of the Department of Health and Human Services and the United Sates Department of Agriculture;
b) provides, if one meal is served, a minimum of 33 and 1/3 percent of the current daily Recommended Dietary Allowance (RDA) as established by the Food and Nutrition Board of the National Research Council of the National Academy of Sciences;
c) provides, if two meals are served, together, a minimum of 66 and 2/3 percent of the current daily RDA; although there is no requirement regarding the percentage of the current daily RDA which an individual meal must provide, a second meal shall be balanced and proportional in calories and nutrients; and,
d) provides, if three meals are served, together, a minimum of 100 percent of the current daily RDA; although there is no requirement regarding the percentage of the current daily RDA which an individual meal must provide, a second and third meal shall be balanced and proportional in calories and nutrients.

Persons Served – Unduplicated Count = To be determined
Persons Waiting for Services = 0
Estimated Service Units = To be determined
Estimated Number of Persons Not Served = 3,096

SAN JUAN COUNTY AREA AGENCY ON AGING – FY 2004

County

San Juan

Populations

Total	14,413	14% growth (1990-2000)
60+	1,636	28%
65+	1,214	36%
75+	526	37%
85+	138	18%

Minorities

60+	751
65+	562

Program	**Number of Clients**
Home-Delivered Meals	107 (13,023 meals)
Congregate Meals	246 (13,000 meals)
Alternatives Program	40
Medicaid Aging Waiver Program	14
Caregiver Respite	12

Other services provided with Title III-B	**Number of service units**
Friendly visitor	4,347
Education and training	5
Information and assistance	227
Transportation	5,380
Telephone reassurance	376
Outreach	202
Assessment/screening	639
Shopping	1,772
Personal Care/home health aide	43

The following were accomplishments listed by the San Juan County Area Agency on Aging in their annual plan update, May 2004.

- The center directors of the senior centers have made great strides in the quality of the services and the programs available to the clients. The end result has been the increase in the number of clients participating in meals and programs. The seniors have indicated verbally of their appreciation for the improvements. The increase has been to the point of maximizing the available space for congregate meals.

- The agency has had excellent representation on the State Advisory Council through the work of Edward Tapaha. He meets with the local centers both on and off the reservation centers and other agencies assuring that information is distributed.

- The county again provided $50,000 in local general funds to the Navajo Nation owned and operated senior centers. These centers have made great progress in providing increased services. For example, the Navajo Mountain Senior Center and the Oljato Senior Center have new additions and the County was able to assist them in obtaining additional construction funds.

- The agency has started into the second year of providing case management as a direct service instead of through a contract. The current case manager has tripled the number of clients on the Alternative Program and has significantly increased the Waiver clientele. Progress continues in developing the In-Home programs in the county.

- There has been interest expressed by many of the citizens in the LaSal area for senior services. This area has previously been an un-served area. The agency has begun planning for future possibilities of services. To begin, we were able to help the group purchase a handicap accessible van for transportation services. We are hoping to help facilitate other services for the seniors in that area in the next year.

- The agency now has a website complete with all the information about the services provided by the AAA. It is updated monthly with the menus and calendar of activities.

- There has been development in the Ombudsman Program in the areas of public information on the services offered, reporting requirements, and training activities.

SIX-COUNTY AREA AGENCY ON AGING – FY 2004

Counties

Juab
Millard
Piute
Sanpete
Sevier
Wayne

Populations

total	66,192	27%	growth (1990-2000)
60+	10,287	13%	
65+	7,834	12%	
75+	3,725	16%	
85+	979	58%	

Minorities

60+	231
65+	163

Program	Number of Clients
Home-Delivered Meals	617 (65,962 meals)
Congregate Meals	1,095 (49,313 meals)
Alternatives Program	109
Medicaid Aging Waiver Program	46
Caregiver Respite	37

Other services provided with Title III-B	Number of service units
Friendly visitor	0
Education and training	0
Information and assistance	403
Transportation	17,757
Telephone reassurance	0
Outreach	323
Assessment/screening	4,615
Shopping	0
Personal Care/home health aide	350

The following were accomplishments listed by the Six-County Area Agency on Aging in their annual plan update, May 2004.

- The AAA continues to improve in all areas of responsibilities due to improved responsibilities and experience of staff.

- Six-County AAA continues to organize In-Home Programs. The AAA has regular in-home coordination meetings to make sure we are communicating the programs of Aging Medicaid Waiver, Alternatives, Family Caregiver, III-B In-Home and Home-Delivered meals. The Six-County AAA currently has four Case Managers and other support staff. Because of the large geographic area and the many hours out of the office, it is imperative to have a formal means to coordinate to be efficient in the service we offer.

- One barrier that has increased in recent months is the serious demand for Home-Delivered Meals in unserved areas. The AAA has addressed this issue with: 1) Those making the requests, 2) The Senior Centers serving those areas, 3) Local Elected Officials, 4) The Local Advisory Council, and 5) The State Division of Aging and Adult Services.

- The barrier is the lack of funding. We currently have a 16 client waiting list and 51 unserved areas in the Six-Counties. In the meeting with County Commissioners we have suggested the solution of additional local funding. At this time none of the counties have offered more funds to address the problem.

- Part time staff turnover continues to be a barrier to the Nutrition Program. Wal-Mart opened in Richfield just after the start of the calendar year 2004. Several cooks and meal delivery drivers left our employment to work for this large corporation. Rehiring and retraining always takes time and resources.

- Our major barrier has most certainly been the operation of the Aging Medicaid Waiver Program. Sorting out the administrative and clinical tasks and the constant change has been very challenging especially to get all documents in order within Medicaid's time frame for payment. Recent months have created a serous cash flow problem. Six-County AAA stated the Waiver Program on July 1, 2003 and we have had a real struggle organizing the details of the program requirements. We have recently made some good progress but realize we have significant work ahead of us.

SOUTHEASTERN UTAH AREA AGENCY ON AGING – FY 2004

Counties
- Carbon
- Emery
- Grand

Populations

total	39,767	7% growth (1990-2000)
60+	6,334	9%
65+	4,861	12%
75+	2,302	30%
85+	601	78%

Minorities

60+	603
65+	469

Program	**Number of Clients**
Home-Delivered Meals	751 (91,457meals)
Congregate Meals	972 (51,871meals)
Alternatives Program	55
Medicaid Aging Waiver Program	47
Caregiver Respite	12

Other services provided with Title III-B	**Number of service units**
Friendly visitor	72,206
Education and training	2,303
Information and assistance	29,674
Transportation	16,619
Telephone reassurance	2,546
Outreach	170
Assessment/screening	2,066
Shopping	2,251
Personal Care/home health aide	3

The following were accomplishments listed by the Southeastern Utah Area Agency on Aging in their annual plan update, May 2004.

- Increased transportation: The AAA was instrumental in helping secure 5 new disabled equipped buses from UDOT during the past year.

- Moab Center Progress: Funding has been secured and plans drawn. Groundbreaking comes in September 2004.

- Budget shortfalls, Emery: The Aging Nutrition Program in Emery was anticipated to be in the deficit by the end of FY2004. By careful management and some restrictions on Congregate meals, the Home-Delivered Meal program had no waiting lists.

- Service Levels: In most cases the service levels projected in the Objectives Section of the Area Plan have been met or exceeded often in the face of reduced revenue. Some data from the NAPIS system was lost because of a hard drive failure in Grand County.

TOOELE COUNTY AREA AGENCY ON AGING – FY 2004

County
Tooele

Populations
total	40,735	53% growth (1990-2000)
60+	4,068	24%
65+	2,975	30%
75+	1,277	57%
85+	261	56%

Minorities
60+	485
65+	343

Program	Number of Clients
Home-Delivered Meals	156 (20,566 meals)
Congregate Meals	877 (40,851meals)
Alternatives Program	46
Medicaid Aging Waiver Program	16
Caregiver Respite	21

Other services provided with Title III-B	Number of service units
Friendly visitor	36
Education and training	51
Information and assistance	2
Transportation	5,250
Telephone reassurance	0
Outreach	254
Assessment/screening	17
Shopping	0
Personal Care/home health aide	103

The following were accomplishments listed by the Five-County Area Agency on Aging in their annual plan update, May 2004.

- We feel that our best accomplishment has been that we have done a lot in our communities to bring about an increase in our services, causing us to have waiting lists. One case in point was a Resource Conference where all available local and state agencies were invited to come and tell about their services or products that are available in our county. Not only were resources made known but referrals to other agencies were being done, helping us to better serve the clients in our county. We are having problems now filling positions to our in-home service programs. The two staff who have done such a great job have had to leave us for personal reasons, and trying to fill these positions has been hard, especially because of the nursing shortage.

- Another setback for us was our Grantsville Center which two teenagers broke into on a Sunday evening about a week after Thanksgiving. They had done over $50,000 destruction. The good part was that the community as well as County people came to help and donations as well as insurance money was there to help repair the Center as well as new items pre-purchased, such as new kiln and a piano.

- We are hoping that by the new fiscal year we will have new computer equipment and programs to have at our Grantsville Center on line with us and the County. This will help us to be more efficient with NAPIS and hopefully we will be able to gather and input information, as an agency. This technical services were done by the County and our County computer people.

- A few years ago our County Commissioners had purchased additional property next to our Tooele Senior Center, and this year they were able to not only increase our parking but beautify and give us access to three different streets making traffic manageability for our seniors and patrons using the Center.

UINTAH BASIN AREA AGENCY ON AGING – FY 2004

Counties
Daggett
Duchesne

Populations
total	15,292	15% growth (1990-2000)
60+	2,085	34%
65+	1,473	29%
75+	555	16%
85+	112	49%

Minorities
60+	102
65+	69

Program	Number of Clients
Home-Delivered Meals	143 (31,870 meals)
Congregate Meals	765 (22,853 meals)
Alternatives Program	231
Medicaid Aging Waiver Program	--
Caregiver Respite	14

Other services provided with Title III-B	Number of service units
Friendly visitor	26,233
Education and training	8,677
Information and assistance	17,958
Transportation	11,185
Telephone reassurance	4,361
Outreach	5,451
Assessment/screening	3,657
Shopping	4,877
Personal Care/home health aide	18
Chore maintenance	4

The following were accomplishments listed by the Uintah Basin Area Agency on Aging in their annual plan update, May 2004.

We are proud of the "state of the agency" here in the Uintah Basin AAA program. We have consistently made adjustments and modifications to our program and believe these are a few of our noteworthy accomplishments:

- **Health Fair:** We presented our 3rd Annual Senior Health Fair on October 29th, 2003 from 9:00 am to 4:00 pm with over 250 seniors in attendance. This fair was developed not only to provide health screening but throughout the day we also held 15 mini seminars addressing senior issues and concerns. These classes covered such topics as: bereavement, safe exercise, caregiver, sleep apnea, diabetic nutrition, computers, prescription programs, and more. We networked 15 other agencies and companies to provide booths containing information and materials to acquaint our seniors with services available in the local area. Area merchants were exceptionally generous and everyone received a prize, with several grand prizes being given.

- **Computers:** We acquired 30 donated computers from a business in SLC. We were also able to establish free internet services and volunteer one-on-one instruction classes for two of our centers. We acquired these computers early in the year so we were able to hold a beginners and computer privacy class at our annual health fair with hands-on experience and overhead projection for easy visual learning. Our Manila center cook will use one of these computers in the nutrition program to track inventory.

- **Transportation:** We have been able to expand one new route and reach seniors who are underserved due to their distant locations. We have been able to expand the use of our fleet to assist seniors in attending special classes and activities at the centers. The Manila seniors received a new ADA 12-passenger bus from U.D.O.T. enabling them to be ADA compliant. The disappointment we have felt as of January 2004 was a $1,000.00 cut from Duchesne County on the gas budget. We are hoping that we can still maintain these new services with this latest cut.

- **Home and Community-Based Alternatives:** Our contracted Case Manager, Juanita Thacker, completes all the screening and assessments, including home-delivered meals clients, which reduces duplication and greatly improves planning of needed services for each senior enrolled in home and community-based programming.

- Juanita sits on the Tribal Medical Rounds Committee and helps coordinate services with the Ute Tribe. This coordination has opened doors for increased trust and communication.

UINTAH COUNTY AREA AGENCY ON AGING – FY 2004

County
Uintah

Populations
total	25,224	14%	growth (1990-2000)
60+	3,404	39%	
65+	2,507	44%	
75+	1,063	64%	
85+	253	77%	

Minorities
60+	291
65+	183

Program	Number of Clients
Home-Delivered Meals	329 (45,457 meals)
Congregate Meals	483 (24,384 meals)
Alternatives Program	60
Medicaid Aging Waiver Program	24
Caregiver Respite	29

Other services provided with Title III-B	Number of service units
Friendly visitor	0
Education and training	395
Information and assistance	2,792
Transportation	7,249
Telephone reassurance	0
Outreach	38
Assessment/screening	1
Shopping	38
Personal Care/home health aide	0
Chore maintenance	479

The following were accomplishments listed by the Uintah County Area Agency on Aging in their annual plan update, May 2004.

- Accomplishments and success continues to be the support from Uintah County Commission. We have been able to maintain financial support from Uintah County this past year to improve the bus parking at the senior center and purchase of vehicles used to deliver meals. We also have obtained two wheelchair-accessible buses this year from UDOT which requires 20 percent local support. We have been able to increase our Transportation and Assisted Transportation services with the additional buses.

- We also have purchased two mini vans which are being used for the delivery of meals.

- We have recently completed a project which was developed by the AAA and the Dietician which has provided a 10-week course to encourage eating foods which results in a healthy lifestyle and course educated participants to be in touch with how we feel when they consume nutritious and healthy foods. Course was very successful and we were able to provide Nutrition Education for 16 individuals who were new to our program.

- Family Caregiver Support Program is going very well with a large number of people being served. Case managers are doing a great job in helping caregivers with information services as well as respite services.

- The things that are not working as planned are the weekend meals that we were planning to begin earlier this year. We had planned to begin weekend meals the first of the year but we were not able to work out the details with the frozen food carriers as fast as we planned to get meals into our area. We were finally successful in negotiating a contract and the meals will begin in April 2004.

- The rising food costs have increased our meal costs this past year. The increase is due to inflation in food and non-food costs, and the costs associated with the delivery of meals such as purchase of meal delivery vehicles, meal delivery equipment, and increasing gas prices.

WEBER/MORGAN AREA AGENCY ON AGING – FY 2004

Counties
Weber
Morgan

Populations

total	203,662	24% growth (1990-2000)
60+	27,192	13%
65+	20,900	16%
75+	10,003	36%
85+	2,288	34%

Minorities

60+	2,677
65+	1,903

Program	Number of Clients
Home-Delivered Meals	1,046 (164,326 meals)
Congregate Meals	1,853 (92,769 meals)
Alternatives Program	103
Medicaid Aging Waiver Program	101
Caregiver Respite	63

Other services provided with Title III-B	Number of service units
Friendly visitor	0
Education and training	0
Information and assistance	6,724
Transportation	37,177
Telephone reassurance	0
Outreach	677
Assessment/screening	0
Shopping	0
Personal Care/home health aide	0

The following were accomplishments listed by the Weber/Morgan Area Agency on Aging in their annual plan update, May 2004.

- The Weber Area Agency on Aging has had a challenging year during the first year of the four-year plan. Most of the home-based programs have seen a greater growth in demand than previous years, causing us to have a waiting list in areas that had never seen one before. The volunteer programs have also seen an expansion of interest and in fact, we have had to start waiting lists for those that offer a stipend. The only area that does not have more clients than capacity is the senior centers which are doing very well but have also seen increased interest. What the Area Agency on Aging and its advisory council are facing now is reviewing new ways to serve more people with the same or less funding but it is bringing people together for discussions and cooperation more than ever. It will take expanding and perfecting this process in order to serve the needs of the elderly in this community during the age-wave crisis.

- The biggest surprise in this challenge has been the waiting list for Meals on Wheels. There was such a sudden increase in requests for the meals that we found ourselves going beyond our capacity quickly because there was not a similar increase in people going off the service. This balance has been what kept us at capacity for years but changed at the beginning of the year. We found it necessary to put everyone on the waiting list and only enroll as many as those who left the program. Enrollment is based on level of need scoring and there is a waiting list placement committee that meets each week to make the decision of who needs the meals the most. This new surge has leveled off now but Weber still has the majority of the State's Meals on Wheels waiting list. We and the Council on Aging have discussed this matter to determine if transferring Congregate Meals money was a solution but decided not to cannibalize that program for the time being.

- The positive happenings this year have been in the success of the Caregiver Program in helping more caregivers than ever; a new Senior Center opening in North Ogden; collaboration with the Medicaid Long-Term Care initiative giving new options to nursing home residents; and the great strides made in preventive health programming with the help of IHC and Weber State University. All of these efforts have emphasized giving our community new options that enable them to help themselves or others at a lower cost than simply waiting to have us take care of them. This will be the nature of all our new initiatives. We will strive to continue informing our seniors of ways they can better take care of themselves while expanding self-directed care options where appropriate, while building even more community collaboration to make the most of what this area has to offer.

Appendix III

ASSESSMENT OF THE LEGAL NEEDS OF THE ELDERLY

ASSESSMENT OF THE LEGAL NEEDS OF THE ELDERLY: EXECUTIVE SUMMARY OF THE FINAL REPORT

I. Executive Summary

Utah's senior population is booming, and consequently, the demand for legal services is increasing. Utah's legal services providers need a clear vision of the legal problems seniors face to plan for the future. The limited resources for legal services programs should be allocated in the most helpful and beneficial way. This study assesses the legal needs of Utah's seniors, their perception and experiences with attorneys, their awareness of current legal services, and the barriers to obtaining legal assistance.

In the spring of 2004, the investigators sent a self-completion survey to 989 seniors throughout Utah. The response rate was a stunning sixty-seven percent (67%). Key findings include:

- Eighty-six percent (86%) of Utah's seniors have experienced a legal difficulty within the last three years.

- A significant number of Utah's seniors indicate legal difficulties in the following areas: telemarketing (58%), the new Medicare Drug Card (53%), estate and advance planning (28%), health insurance (27%), and problems with salespersons (25%).

- Fifty percent (50%) of seniors have used an attorney's services in the past ten years, and of these, seventy-three percent (73%) found the attorney's service to be very helpful.

- Seniors who have used an attorney in the past are more likely to call an attorney they know for future legal needs (55%).

- The majority of seniors (56%) have never heard of any legal services or senior advocacy organization, such as Utah Legal Services, Adult Protective Services, or Legal Aid Society.

- The top legal issues seniors want help with are estate planning (44%), government benefits (43%), and advanced planning (40%).

- Seniors indicate that the most needed services are a legal hotline (69%), a legal guidebook (60%), and free or low-cost attorneys (44%).

- Twenty-six percent (26%) of seniors live on a low income, less than 150 percent of poverty.

II. Introduction

A. The Importance of Legal Needs

At present, about one in eight Americans is age 65 or older. However, because of the baby boom population, it is projected that by 2030 about one in five Americans will be age 65 or older. Utah will also experience explosive growth in its senior population. From 2000 to 2030, this population will increase by 155 percent. Utah has the sixth fastest growth rate in the nation for people age 65 and older.

This tremendous growth will impact Utah in many ways, including a greater demand for legal services. It is important for Utah's legal services community and policymakers to prepare for the current needs of seniors and for the upcoming changes.

It is essential to recognize legal needs as part of the spectrum of senior services. Often gerontology experts do not understand the importance of addressing legal issues, detrimentally affecting seniors. Seniors who go without legal assistance can suffer financially, emotionally, and physically. For instance, many seniors deed their homes to their family while still living in their home. The family may borrow against the home, the bank forecloses, and the senior is evicted.

Attorneys can assist and educate seniors on how to keep, protect, and properly convey their property. In addition, with legal assistance seniors can plan ahead for medical incapacity and decision-making. Attorneys can protect seniors from consumer and telemarketing fraud, abuse, and financial exploitation. And as advocates they can help guide seniors through health insurance and government benefit problems.

B. Current Funding of Legal Services

Utah has very limited resources for Senior Legal Services. The Older Americans Act, a federal law, requires free legal assistance for persons 60 and older regardless of income. But the federal government does not provide adequate funding for legal assistance, and at present, the State of Utah does not provide any funding for Senior Legal Services.

C. The Need for a Legal Assessment Survey

Utah's seniors need legal services, and many organizations do their best to provide those legal services. But what are the legal needs of Utah's seniors? What services do seniors need? How should Utah's legal services providers allocate resources to be more effective? What programs and initiatives should be pursued to meet the legal needs of seniors?

There is very little state-specific data to answer these questions or suggest the types of legal problems seniors face. According to other Legal Service Developers, no state has ever specifically surveyed seniors' legal needs.

Utah's senior network has very little data on the legal needs of Utah's seniors. Thus, legal programs and services are being created for seniors based solely on client interactions and national data. The senior population is being served based on what the senior network thinks is needed, rather than what seniors really need.

As funding becomes scarcer, it is important to develop programs around the true needs of seniors. And to attract further funding, it is essential to show that there is a need. Thus, this survey has three goals – (1) to obtain a clear picture of the needs of Utah's seniors, (2) to focus resources to provide legal services with the greatest impact, and (3) to provide information that will be helpful in obtaining additional funding for new legal service programs and initiatives.

D. Study Purposes

This report is a detailed summary of the findings from a statewide survey of older Utah residents, conducted by Jilenne Gunther of the Borchard Foundation Center on Law and Aging, and Alan Ormsby of the Utah State Division of Aging and Adult Services. The purposes of the study are to assess (1) Utah's seniors' legal needs, (2) their awareness of available legal services, (3) their experiences with lawyers and perceptions of lawyers, (4) the barriers seniors have with using a lawyer, (5) the legal issues that concern them, and (6) the legal services that would benefit them most.

E. Study Design

The study involved the administration of self-completion mail questionnaires to 989 Utahns ages 60 and older throughout the state. These seniors were drawn from an original random stratified probability sample of over 6,000 Utah seniors who were surveyed in 2001. These seniors indicated a willingness to participate in future surveys. Although these seniors self-selected, the Brigham Young University (BYU) Center for Statistical Research confirmed that the sample size of 989 seniors provided a representative sample.

The questionnaire was drafted specifically to address seniors' legal needs. In doing so the principal investigators also reviewed other legal needs surveys, including Washington State's 2003 Civil Legal Needs Study. The survey instrument included questions involving demographics, health insurance, government benefits, housing problems, consumer issues, family problems, abuse issues, estate planning, awareness of legal services, experiences and perceptions of lawyers, and legal services seniors want. Seniors were asked to report problems they had experienced in the past three years.

Appendix IV

LISTS

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MANAGER, SUPPORT SERVICES: Jerry Callister (801) 538-4592
TRAINING SPECIALIST: Elizabeth Sollis (801) 538-4339

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			Clearfield, UT 84015
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				1050 South 500 West
				Brigham, UT 84302
				(435) 734-4046
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				County: Box Elder
					115 W. Golf Course Rd.
					Suite B
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					FAX: 787-3444
					
					Counties: Cache
					               Rich

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Juab
Kane
Millard
Piute
Sanpete
Sevier
Utah
Washington
Wayne
Carbon
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		               Piute
		               Wayne
		
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				               Beaver
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					               Kane
					
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					               San Juan

September 2004